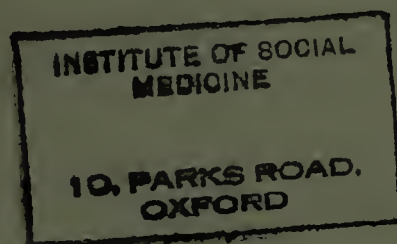


NORTHAMPTONSHIRE COUNTY COUNCIL



Annual Report

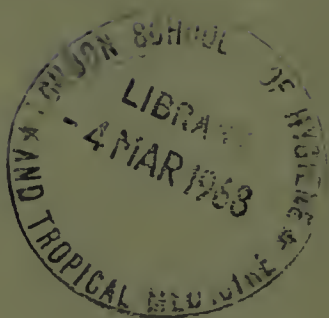
OF THE

MEDICAL OFFICER
OF HEALTH

FOR THE YEAR

1940

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NORTHAMPTONSHIRE COUNTY COUNCIL.

COUNTY HEALTH DEPARTMENT,
 GUILDHALL ROAD,
 NORTHAMPTON.

November, 1941.

To the Chairman and members of the Northamptonshire County Council.

MR. CHAIRMAN, MY LORDS, LADIES AND GENTLEMEN,

I have the honour to present the Forty-Fourth Annual Report of the County Medical Officer of Health for the year 1940.

War inevitably and irresistibly retards all forms of social progress including those with which the public health service is identified such as housing, nutrition, the welfare of the mother and child and the control of tuberculosis. It is the Government's policy to take all possible steps to restrict the noxious influences associated with war as far as this is not inconsistent with the main object—that of winning the war. Thus, preferential treatment has been given to mothers and young children with the object of conserving their nutrition and well-being, and as was experienced during and after the last war we are now seeing the tempo of progress in certain directions very considerably quickened. For example, the National Milk Scheme, in spite of any objections that may be taken to its administration, is a bold step forward taken by the Government in recognising that free milk should be given when required on economic grounds. At last, the futile pretence need no longer be maintained of having to wait until a child is suffering from signs of malnutrition before recommending a supply of milk.

Again, the risk of pollution of water, due to possible contamination of mains by sewage as the result of damage by enemy action, led the Government to make chlorination compulsory for all supplies serving a population of 1,000 or more, which is a public health measure that should have been taken years ago. Finally, the Ministry of Food required that all slaughtering should be concentrated in a restricted number of abattoirs where proper meat inspection can be carried out—the days of small unsatisfactory slaughter houses are now over.

In what directions has the war influenced the inhabitants of the county? What has been the result of these influences on their general state of health? In answer to the first question, Northamptonshire has so far been spared the horrors of total war and in 1940 only one air raid, resulting in less than twenty casualties is to be recorded. The civilian population of the county has, however, been affected by the "blackout" regulations with consequent restriction in ventilation both at home and in the factory, by crowding due to the reception of immigrants from vulnerable areas, by dietary changes inevitable in a country which normally imports most of its food, by longer hours of work and extra spells of duty on Civil Defence services, and finally, by the mental strain and anxiety concerning relatives in the combatant forces. The influence of all these factors increased during the year especially after September. In no part of the county did the population sleep in shelters so that the effects of shelter life need not be taken into consideration.

For the assessment of the influences which have been enumerated we naturally turn to a comparison of the vital statistics for 1940, the first complete year of war, with the statistics of the immediate pre-war period. On comparison of 1939 with 1940 it is found that the general

death rate has increased from 12 per 1,000 to 13 per 1,000 ; the infant mortality rate has gone up from 40.4 to 48.4 per 1,000 births ; the maternal mortality rate from 1.13 to 3.02 per 1,000 live and still births, and the tuberculosis mortality rate from 49 per 100,000 to 58 per 100,000. What significance is to be attached to the regressive tendency of the 1940 statistics ? Firstly, it is to be remembered that in 1939, the lowest infant mortality rate and the lowest tuberculosis death rate ever recorded in the county were experienced. In fact, 1939 was a particularly favourable year and new low records cannot be expected every year. Secondly, was there any factor not associated with the war which had an adverse influence on the state of public health in the county ? The weather conditions in the winter of 1939-40, especially after the turn of the year, were exceptionally severe. Meteorological records are not available but it will be generally admitted that the weather was more inclement than was experienced for many years. The weather for several weeks on end was arctic, and one read of tramps being rescued from snow drifts ! Inclement weather results in an increase in deaths from respiratory diseases. A comparison of 1939 with 1940 shows that in the former year there were 176 deaths from pneumonia and bronchitis and 363 deaths in the latter. These additional 187 deaths from respiratory diseases raised the general death rate from 12 to 13 per 1,000 and so accounted for the total rise in the rate between 1939 and 1940. Among infants under one year, there were 13 more deaths from respiratory diseases in 1940 than in the previous year and the increase would raise the infant mortality rate from 40 per 1,000 births to 45 per 1,000 births, thus accounting for about 60% of the regression in the rate. The potential influence of certain war conditions, such as the blackout, dietary restrictions and longer hours of work in causing a rise in the death-rate from respiratory diseases has not been overlooked, but the point I desire to make clear is that had there been no war, my own view is that the severe weather of the early weeks of 1940 would have resulted in increases in the general death rate and in the infant mortality rate, due to the greater number of deaths from respiratory diseases. The rise in the maternal mortality rate, although disappointing, should not be regarded with too great concern because the total number of deaths on which the rate is calculated is small and chance variations from one year to another are bound to occur so that a comparison over a period of years is essential. From a study of the fatal cases, I am not of the opinion that any of the deaths can be attributed to influences associated with the war. While the increase in the tuberculosis mortality rate is not great, it is well known that this disease always reacts promptly to war conditions and that, unfortunately, a rise in the tuberculosis mortality must be expected.

The discussion of the vital statistics for 1940 which I have presented is restricted by the fact that time is not available for a fuller analysis of the data, that the data are not as complete as one would desire and, finally, expert statistical opinion should be consulted.

It is with gratitude that I acknowledge that the Health Committee is keenly alive to the dominant need for maintaining all the health services of the county and have instructed that every effort should be made to overcome difficulties as they arise. From a perusal of the details embodied in the report it can, I think, be said that in the first year of the war the Health Committee has been enabled to implement their policy, for the services have not only been maintained but in certain directions an extension has been effected.

As the war continues an increasing amount of work is required in connection with the Civil Defence Casualty Services, first aid posts, parties, ambulances and hospitals, and in relation to the Casualty Bureau and the Civil Nursing Reserve, while the supervision of three emergency maternity homes, four nursery parties for children under five, and five hostels for difficult evacuee children has imposed additional duties on the department.

I have the honour to be,

Your obedient Servant,

CHARLES MILLIKEN SMITH,
County Medical Officer of Health.

STAFF.

The staff changes were as follows :

In place of Dr. J. A. Roughead, who resigned in August, 1940, Dr. D. A. McCracken was appointed Deputy County Medical Officer of Health and Medical Officer of Health of Towcester Rural District in addition to his other districts. To perform the infant welfare and school medical duties formerly undertaken by Dr. McCracken, the Council appointed Dr. Dora M. Butler as temporary Assistant Medical Officer, on 2nd September, 1940.

Dr. J. A. A. Duncan, Assistant County Medical Officer of Health and Medical Officer of Health for Brixworth Rural District and Brackley Borough and Brackley Rural District, resigned in October, 1939, and in his place Dr. D. J. Jones was appointed on 1st January, 1940.

Dr. T. O. Garland, Assistant County Medical Officer of Health and Medical Officer of Health for Kettering Rural District and the Urban Districts of Burton Latimer, Corby, Desborough and Rothwell, resigned in October, 1940, and was succeeded on 1st December by Dr. J. T. Murphy.

Dr. C. F. Campbell was appointed from May 1940 as Assistant Tuberculosis Officer and Assistant Resident Medical Officer at Rushden House Sanatorium, under the scheme of re-organisation of the Tuberculosis Medical Staff.

With the approval of the Ministry of Health, Dr. M. C. ImThurn was appointed from the 3rd to the 14th December and then from 6th January, 1941, to cope with the additional duties imposed on the Department in connection with the welfare of evacuee mothers and children.

To replace Mr. S. Harris, the Assistant County Sanitary Inspector, who was given leave of absence from 31st October, 1940, Miss F. Hillson, N.D.D., was appointed in November, 1940, as temporary Milk Inspector.

Health Visitors. The staff at the end of the year consisted of a Superintendent Health Visitor and 21 Health Visitors. In addition, two Health Visitors and five School Nurses were seconded from the Evacuation Authorities.

SECTION A.

Statistics and Social Conditions.

1(a). GENERAL STATISTICS FOR THE YEAR.

Area of the Administrative County	*578,947 acres
Population (Census 1921)	211,509
(Census 1931)	217,133
(Estimated resident population, middle of 1940)	241,200
Number of inhabited houses (Census 1921)	50,538
(Census 1931)	57,047
Number of families or separate occupiers (Census 1921)	52,286
(Census 1931)	58,964
Rateable Value (April 1st, 1940)	£1,203,668
Actual product of a penny rate 1939-1940 (whole area)	£4,658/17/9

* Subsequent to the extension of the boundaries of the County Borough of Northampton, on April 1st, 1932.

1(b). VITAL STATISTICS.

	TOTAL	MALE	FEMALE	BIRTH-RATE per 1,000 of the estimated population.
Live births (Legitimate)	3,241	1,630	1,611	} 13.94
„ „ (Illegitimate)	122	64	58	
				<i>Rate per 1,000 Total (Live and Still) Births.</i>
Still-births	114	58	56	32.78
				DEATH-RATE per 1,000 of the estimated population.
Deaths	3,153	1,638	1,515	13.07†
				<i>Rate per 1,000 Total (Live and Deaths. Still) Births.</i>
Deaths from puerperal causes :—				
Puerperal and post abortion sepsis			2	.55
Other maternal causes			9	2.47
Total			11	3.02

Death-rate of infants under one year of age :—

All infants per 1,000 live births	48.39
Legitimate infants per 1,000 legitimate live births.....	46.90
Illegitimate infants per 1,000 illegitimate live births	89.43

† See next page.

Deaths from	(a) Cancer (all ages)	433
	(b) Measles (all ages)	7
	(c) Whooping Cough (all ages)	7
	(d) Diarrhoea (under 2 years of age)	7

The birth rate of 13.9 is lower by 1.1 per 1,000 of the population than the rate for the year 1939, and is also lower by .7 than the rate for England and Wales.

The death rate (13.0) is higher by 1.0 per 1,000 of the population as compared with the previous year, but is 1.3 below the rate for England and Wales.

The birth rate exceeded the death rate by .87 per 1,000 of the population.

The seven chief causes of death accounted for 67.3 per cent of the total deaths, and are led by heart disease (25.2), cancer (13.7), intracranial vascular disease (10.4), bronchitis (6.3), pneumonia (5.2), tuberculosis of the respiratory system (3.6) and other violent causes (2.9). The first two causes of death occupy the same relative position as in the year 1939.

The number of deaths associated with childbirth amounted to eleven, as against four in the year 1939.

The Maternal Mortality Rates per 1,000 live and still births during the last five years have been as follows :

	1936	1937	1938	1939	1940
Administrative County (<i>Number of Deaths</i>)	2.84 (9)	2.17 (7)	2.41 (8)	1.13 (4)	3.02 (11)
England and Wales	3.65	3.13	2.97	2.82	2.16

The infant mortality rate per 1,000 births (48) is eight above that for the year 1939 and three above the average for the previous ten years ; it is, however, seven below that for England and Wales for the year 1940. The illegitimate infant mortality rate is 42 higher than the rate for the year 1939. The infant mortality rates per 1,000 births during the last ten years have been as follows :

Infant Mortality Rate:	1931	1932	1933	1934	1935	1936	1937	1938	1939	1940
Administrative County	46.1	45.5	42.0	57.2	50.6	47.9	43.8	41.1	40.4	48.3
England and Wales	66	65	64	59	57	59	58	53	50	55

† *Nett Death-Rate.*

The Comparability Factor for the Administrative County is 0.87, and this gives a nett County death-rate of 11.3 as against a crude death-rate of 13.0, and as against 14.3 for England and Wales. This death-rate of 11.3 is the rate which, it is assumed, would be arrived at if the

age and sex constitution of the population of Northamptonshire was distributed in the same proportion as that of England and Wales as a whole.

2. AREA AND POPULATION.

There has been no change in the area of the Administrative County during the year 1940.

In his memorandum with regard to statistics for the year 1940, the Registrar General states that "populations . . . are given for calculation of Death Rates or the incidence of notifiable diseases amongst civilians. Estimates of the numbers and distribution of the non-civilian population are not available and the birth rate can only be based on the civilian population of 1940 as used for death rates."

On this basis the civilian population of 1940 for the Administrative County is estimated by the Registrar General to be 241,200.

SECTION B.

General Provision of Health Services.

1. LABORATORY FACILITIES.

The following is a summary of the work done in the County Laboratory during the year 1940:

No. of milk samples examined (Methylene Blue Test)	5,493
No. of milk samples examined (Plate Count)	49
No. of milk samples examined (Phosphatase Test)	66
No. of water samples examined (bacteriologically)	86
Total number of all samples examined	5,694

The totals for years 1933-39 were 459, 760, 1,491, 1,533, 2,429, 3,100 and 4,074 respectively.

MILK

The 5,608 samples of milk may be classified as follows :

Designated milk	4,024
Non-designated milk	1,434
School milk—raw	35
pasteurised	36
Pasteurised milk	71
	79
	<u>5,608</u>

The following table shows the results of samples (except school milk samples) examined by the Methylene Blue Reductase Test during 1940 :—(Note : Satisfactory—Passed the Methylene Blue Test. Not Satisfactory—Failed to pass the Methylene Blue Test.)

SAMPLES OF DESIGNATED MILK—			SAMPLES OF NON-DESIGNATED MILK—		
Month	Number examined	Percentage Satisfactory	Number examined	Percentage Satisfactory	Total Samples
January	288	91	99	92	387
February	240	82	65	68	305
March	283	83	125	72	408
April	405	77	163	77	568
May	371	68	100	54	471
June	324	38	129	20	453
July	370	46	158	29	528
August	279	50	126	43	405
September	345	69	119	66	464
October	419	78	132	79	551
November	369	84	108	74	477
December	331	91	110	86	441
TOTAL	4024	71	1434	62	5458

Total samples of Designated Milk taken during 1939	2,673	} 51% increase.
Total samples of Designated Milk taken during 1940	4,024	

It will be noted from the above table that of the 4,024 samples of Designated milk, 71% complied with the requirements of the Orders. In the case of non-designated samples examined 62% were satisfactory. There is no statutory test for cleanliness of non-designated milk and in its absence the standards described in my 1938 report are still in force in this County. The 1,434 samples submitted by District Councils are classified below and compared with the two previous years :

NON-DESIGNATED MILK SAMPLES.						
	1938		1939		1940	
	No.	Per cent.	No.	Per cent.	No.	Per cent.
GOOD	1020	67.3	785	69.9	888	61.9
MODERATE	213	14.1	147	13.1	282	19.6
BAD	283	18.6	191	17.0	264	18.4
TOTALS	1516	—	1123	—	1434	—

School Milks.

There were 71 samples of milk collected from schools of which 36 were pasteurised. Of the 35 raw milk samples, 22 passed the Methylene Blue Test : of the pasteurised milk samples, 3 were examined by the Plate Count method, all of which were satisfactory and the remaining 33 by the Phosphatase Test, 20 of which passed the test.

Pasteurised Milk.

The phosphatase test is still being carried out for the examination of pasteurised milk and is gradually replacing the Plate Count.

In addition to the 33 school milk samples mentioned above, 33 samples submitted by District Councils were examined by the Phosphatase Test, of which 2 failed to pass and 46 by the Plate Count all of which were satisfactory.

Water.

The number of samples examined bacteriologically was 86, these being submitted chiefly by District Councils.

2. AMBULANCE FACILITIES.

These were described in the 1938 report.

3. MENTAL DEFICIENCY.

The number of ascertained cases on the Register at the end of the year was 615.

In Certified Institutions :	<i>Males</i>	<i>Females</i>	<i>Total</i>
Stoke Park Colony	7	5	12
Earlswood	—	1	1
Bromham House Colony	39	46	85
Kettering Public Assistance Institution	5	9	14
Wellingborough Public Assistance Institution	5	7	12
Whittington Hall, Chesterfield	—	1	1
Brentry Colony	1	—	1
State Institutions	6	7	13
On Licence from Institutions	6	5	11
Cases under Guardianship	4	2	6
On Licence from Guardianship	—	1	1
Cases under Statutory Supervision ...	62	45	107
Cases under Voluntary Supervision ...	111	84	195
Cases otherwise " Ascertained "	72	84	156
Total			615

Ascertainment Rate, 2.5 per 1,000 population.

Ascertainment.

Six cases have been referred to the Mental Deficiency Committee by the County Education Authority, and three other cases by the Kettering Education Authority. Thirty-three cases have been ascertained through the Public Health and Public Assistance Services. The number of Orders made under the Mental Deficiency Acts during the year was seven. Two cases were removed to Mental Hospitals from Certified Institutions. Orders for detention relating to five defectives lapsed by operation of law during 1940.

Guardianship.

Six defectives are in the care of guardians supervised by the Brighton Guardianship Society and from the monthly reports received from the Society it would appear that these patients are happy and well cared for. One defective is under guardianship in the County and receives regular visits from the Mental Welfare Officer and one of the Council's Assistant Medical Officers. Three defectives under Statutory Guardianship who have been evacuated to this County (one from Coventry and two from London) are also visited by the Mental Welfare Officer and an Assistant Medical Officer periodically.

Licence.

One male patient is on licence from Brentry Colony and supervised by the Brighton Guardianship Society. Five male defectives are on licence in the County (two are working as labourers, one is employed by a Co-operative Society and two are living at home). Five female defectives are in domestic service. All these patients are visited periodically by the Mental Welfare Officer.

Medical Examinations.

Thirty-three medical examinations by Assistant Medical Officers have been carried out during the year.

Domicillary Supervision.

Routine visits by the County Health Visitors were made to the defectives under Statutory and Voluntary Supervision in their homes. 1,089 interviews and visits have been paid by the Mental Welfare Officer to the homes of defectives under supervision, guardianship or on licence and where close supervision was considered desirable and special advice or assistance needed.

Home Training.

In spite of the difficulty in obtaining supplies of wool, seven defectives are doing rug-making and embroidery in their own homes and show great interest. Visits of an instructional nature were paid by the Mental Welfare Officer.

General.

The Mental Welfare Officer has acted as escort in the conveyance of six patients certified under the Mental Deficiency Acts. Information for Petitions and all other documents has been collected and prepared by the Mental Welfare Officer, who has also acted as escort to patients going on licence from institutions and others returning to institutions from licence.

Eighty-two Special Reports on home circumstances, for the information of the Board of Control, or Visitors to Institutions, or other Authorities have been supplied by the Mental Welfare Officer.

The outstanding feature of the year's work was the increasing difficulty in obtaining institutional accommodation.

4. MATERNITY AND CHILD WELFARE.

This section of the report, in so far as it deals with Midwives and Maternity and Nursing Homes, refers to the whole Administrative County. The Borough of Kettering is a separate Maternity and Child Welfare Authority, and details of its Welfare work will be found in the Report of the Medical Officer of the Borough.

(1) MIDWIFERY AND MATERNITY SERVICES.

Midwifery Services.

No variation has been made in the arrangements for the provision by the Northamptonshire Nursing Association of a domiciliary service of midwives in pursuance of Section 1 of the Midwives' Act, 1936.

One permanent holiday nurse was employed by the County Nursing Association during the year. In addition, 55 nurses were employed for emergency duty and to relieve temporarily during holidays, sickness, etc.

The number of cases attended by midwives employed by District Nursing Associations in pursuance of Section 1 of the Midwives Act, 1936, was as follows :

	1939	1940
Cases attended as midwives	1149	1165
Cases attended as maternity nurses	1036	1040
	<hr/>	<hr/>
TOTAL	2185	2205
	<hr/>	<hr/>

The midwives attended 91.58 per cent. of the total births in the County—60.34 per cent. as midwives and the remainder as maternity nurses.

The number of midwives in independent practice at the end of the year was 33.

(ii) NURSING IN THE HOME.

Under an agreement between the County Council and the County Nursing Association for the provision of special nurses in certain cases of infectious disease, 15 cases of puerperal pyrexia, 11 of whooping cough, 6 of ophthalmia neonatorum, 90 of measles, and 37 cases of infantile diarrhoea were nursed in the home. Nursing care was also given in a number of other cases not strictly provided for in the agreement, including 101 cases of pneumonia and 344 of influenza.

(iii) MIDWIVES.

The Supervisor of Midwives (who is also County Superintendent and Secretary of the Northamptonshire Nursing Association) and her staff made the following visits during the year : Routine visits, 295. Special investigations, 223.

The number of midwives practising in the area at any time during the year was 200 ; on December 31st, 141 remained in practice. Of the latter, 7 were employed in Public Assistance Institutions, 67 by the Northamptonshire Nursing Association under arrangements made with the Local Supervising Authority in pursuance of Section 1 of the Midwives Act, 1936, 5 at Kettering and District General Hospital, one at Brackley Cottage Hospital, 27 in emergency maternity homes, one in an emergency hostel, 5 in private Nursing Homes and 28 in private practice.

Orders under Section 33 paragraphs (1) and (2) of the Emergency Powers (Defence) Regulations, 1939, were made in respect of five midwives who had surrendered their certificates under sub-section (1) of Section 5 of the Midwives Act, 1936. These women act as midwives or maternity nurses in the Administrative County on such occasions only as they may be directed so to act by the County Medical Officer of Health or in emergency, in accordance with such general instructions as such officer may issue.

No uncertified person was reported as having practised during the year.

Medical Aid to Midwives. During the financial year, the midwives notified that they had called in medical aid in 660 cases and 393 claims for payment of fees were dealt with from medical practitioners whose assistance had been sought, as against 598 notifications and 366 claims in the previous year ; the above figures include evacuees.

Educational and Social Work. The customary monthly lectures of the Midwives' Union could not be held owing to war conditions, but a special post graduate course was held during March, April and May, at which the attendances were exceptionally good. The lectures were given by Mr. R. Watson, F.R.C.S.(Ed.), F.R.C.O.G., Mr. H. Waller, M.B., M.R.C.S., Mr. A. Alan Brews, M.D., M.R.C.O.G., and Professor F. J. Browne, F.R.C.S.(Ed.), F.R.C.O.G.

(iv) MATERNITY AND NURSING HOMES.

The number of homes on the register during the year was 7, one of which was closed in February, and 21 visits of inspection were paid by the Assistant Medical Officer. In addition, 8 inspections were made to midwives in Kettering and District General Hospital and Kettering Public Assistance Institution.

Further particulars regarding the Nursing Homes in the County are given below.

The following table gives particulars of the action taken by the Local Supervising Authority under Sections 187 to 194 of the Public Health Act, 1936 :—

	MATERNITY HOMES.	OTHER NURSING HOMES.
Number of applications for registration received during 1940	—	1
Number of Homes registered	—	1
Number of orders made refusing or cancelling registration	—	—
Number of appeals against such orders	—	—
Number of cases in which such orders have been :—		
(a) confirmed on appeal	—	—
(b) disallowed	—	—
Number of applications for exemptions from registration.....	—	2
Number of cases in which exemption has been—		
(a) granted	—	2
(b) withdrawn	—	—
(c) refused	—	—

The registered homes in the County at the time of reporting were (unless otherwise stated) :—

1. "Bethel Nursing Home," Kettering Road North, Northampton.
2. "Woodfield Nursing Home," 36, Wellingborough Road, Finedon.
3. "Burnside Nursing Home," Brackley.
4. "Newlyn Nursing Home," 90, Rockingham Road, Kettering (Maternity only).
5. Lower Addingtons, Evenley.

(v) MATERNAL MORTALITY (excluding Kettering Borough).

The Registrar-General reported 8 maternal deaths, one of which was from sepsis.

1. *Sepsis*. Pulmonary embolism. Patient died at home. Ante-natal care undertaken by doctor and midwife. Treated for toxæmia of pregnancy, normal delivery, developed slight phlebitis.

Other causes.

2. *Puerperal pyrexia and scarlatina*. Patient died at home. Ante-natal care undertaken by own doctor.

3. *Myocarditis and toxæmia of pregnancy.* Patient died at home, but was confined in hospital. Under care of consultant obstetrician throughout pregnancy.

4. *Toxæmia, post partum hæmorrhage, chronic malnutrition.* Patient died in hospital, attended ante-natal clinic.

5. *Puerperal eclampsia.* Patient died in hospital, no record of ante-natal care.

6. *Pulmonary embolism, following post partum hæmorrhage.* Patient died at home. Under care of own doctor and consultant throughout pregnancy, consultant called in after delivery.

7. *Pulmonary embolism following removal of retained placenta.* Patient died at home. Ante-natal care undertaken by own doctor.

8. *Placenta prævia and post partum hæmorrhage.* Transferred death. Died in hospital.

In addition the following deaths were investigated :

1. *Uræmia and chronic nephritis, accelerated by pregnancy.* Died in hospital, had not booked, sent in as emergency.

2. *Thyroid crisis, premature labour following partial thyroidectomy.* Died in hospital.

3. *Miscarriage associated with acute dermatitis.* Died in hospital. Attended ante-natal clinic and hospital.

4. *Pulmonary embolism.* Died at home. No record of ante-natal care.

5. *Transferable death.* Evacuee. Died in hospital. Cæsarian hysterectomy for fibroid uterus, surgical shock. Attended ante-natal clinic on evacuation, and referred to consultant who kept her under close observation.

6. *Acute Pneumonia.* Patient died in hospital. Had attended ante-natal clinic once. Not associated with pregnancy.

The death rate per thousand live and still births was 2.55. The rate for England and Wales was 2.16 per thousand live and still births.

Puerperal Pyrexia. 31 notifications were received (excluding Kettering Borough), 12 of the notified cases were treated in hospital ; one died.

(vi) OPTHALMIA NEONATORUM. Nine cases were notified (excluding Kettering Borough) all of which made a good recovery.

CASES			VISION UN- IMPAIRED	VISION IMPAIRED	TOTAL BLINDNESS	DEATHS
NOTIFIED	TREATED					
	AT HOME	IN HOSPITAL				
9	9	—	9	—	—	—

All cases were visited by the Assistant Medical Officers.

Arrangements are made with Northampton General Hospital, the Hospital of St. Cross, Rugby, the Stamford, Rutland and General Infirmary, and the Oxford Eye Hospital for the admission of these cases, either with or without their mothers, and no charge to the parents is made for treatment.

(vii) MATERNITY HOSPITALS.

No changes were made in the arrangements which are described in previous reports.

The cases actually admitted under the arrangements of the Public Health Committee during the year were :

County Maternity Home, Kettering	82
Kettering and District General Hospital	25
The Barratt Maternity Home, Northampton General Hospital	151
Stamford, Rutland and General Infirmary	—
Market Harborough and District Hospital	—
Hospital of St. Cross, Rugby	1

The total number of cases admitted to hospital under the County arrangements was 259, compared with 221 in 1939 and 207 in 1938.

(viii) CLINICS AND TREATMENT CENTRES.

Additional Infant Welfare sessions for evacuees were held weekly at Wellingborough and Rushden.

I have pleasure in reporting that the Rushden Infant Welfare Centre again secured honours in the National Parentcraft Competition ; the Centre, by taking the Mildred Lister Cup as 2nd prize in the competition for Welfare Centre teams, and a mother of the Centre—Mrs. Mason—by retaining the Rhondda Shield for the best mothercraft essay.

At the end of the year there were 27 Infant Welfare Centres in the County, and 8 Ante-Natal Clinics. 4 additional ante-natal clinics were provided for evacuee mothers, of which 3 were open at the end of the year.

Ante-Natal clinics were held weekly at Corby, fortnightly at Wellingborough, Rushden and Northampton, and monthly at Byfield, Thrapston, Brackley and Welford.

New clinics were opened in September at East Haddon Hall, which meets on Mondays at 10 a.m., and in November at Foundry Schools, Daventry, on the first Friday in the month at 10 a.m., (both of which are attended by evacuees and County residents). An additional clinic for evacuee mothers to be admitted to St. John's Emergency Maternity Home was commenced in September in the Health Department, Guildhall Road, Northampton, on Thursday mornings at 10 a.m.

The total number of attendances at all Infant Welfare Centres during the year by children under one year of age was 8264, and by children between the ages of one and five years, 7862, showing a decrease of 544 attendances on the figures of the previous year.

The total number of expectant mothers who attended County Council clinics during the year was 1333* (991 in 1939). They made 3458 attendances (2159 in 1939) and 78 Post-Natal attendances. In addition, expectant mothers from County areas may attend Ante-Natal Clinics belonging to the Kettering Borough Council, the Warwickshire County Council at their Rugby Maternity Home, the Kettering and District General Hospital and the Barratt Maternity Home, Northampton.

The total number of expectant mothers attending clinics administered either by the County or by other Authorities was 1772, and the number of attendances was 4469, compared with 1389 and 3586 respectively in 1939.

The following statistics relate to ante-natal clinics under the control of the County Council.

ANTE-NATAL CLINICS.

	1939	1940
No. attending for first time	877	1,428
Total Ante-Natal attendances	2,159	3,458
No. sent to hospital :		
For consultation	26	63
„ confinement (abnormality)	59	56
„ confinement (lack of accommodation)	63	515
„ Ante-Natal treatment	4	17
„ Ante-Natal treatment and confinement	6	20
„ Ante-Natal treatment and miscarriage	1	—
No. treated on district (confinement)	597	644
No. treated on district (miscarriage)	3	4

* This figure includes a number of women who made their first attendance in 1939.

	Wellingborough	Northampton	Byfield	Corby	Rushden	Brackley	Thrapston	Welford	East Haddon	Daventry and Brackborough	St. John's E.M.H.	Wellingborough G.E.S.	Total 1940	Total 1939
ANTE-NATAL CLINICS, 1940.														
No. attending for first time	140	193	66	214	114	42	78	38	125	78	265	75	1428	877
Total Ante-Natal attendances	264	446	131	748	304	69	141	78	295	167	645	170	3458	2159
No. on register	173	214	72	251	151	44	86	43	127	79	283	94	1617	991
Evacuees and other non-residents	38	58	8	7	27	9	8	6	126	78	283	94	742	139
No. of sessions	22	23	12	49	22	11	12	10	16	9	25	7	218	146
Attendances :—Primary	135	191	55	208	114	42	78	38	125	78	265	75	1404	869
Subsequent	129	255	66	540	190	27	63	40	170	89	380	95	2044	1290
Post-Natal	18	24	2	25	3	2	4	1	—	—	5	—	84	83
Total	282	470	133	773	307	71	145	79	295	167	650	170	3542	2242
Midwives bringing cases	13	19	7	12	6	4	6	3	3	2	—	—	—	—
Average attendance per case	2.1	2.5	2.0	3.7	2.7	1.6	1.9	2.1	2.3	2.2	2.8	2.3	—	—
Average attendance per session	12.8	20.4	11.1	15.8	14.0	6.0	12.9	7.8	18.4	18.7	26.0	27.0	—	—
Transferred from other clinics	—	—	—	1	—	—	—	2	2	1	18	—	—	—
Transferred to other clinics	—	4	—	—	—	—	—	—	—	—	—	—	—	—
No. sent to Hospital :—														
For consultation	—	16	2	15	3	—	6	2	2	4	13	—	63	26
For confinement, abnormality	8	18	2	11	5	1	4	3	—	3	1	—	56	59
For confinement, accommodation	15	22	3	14	10	6	7	2	92	49	217	78	515	63
For miscarriage	—	—	—	—	—	—	—	—	—	—	—	—	—	1
For ante-natal treatment	—	2	—	—	—	—	—	—	—	—	15	—	17	4
For ante-natal treatment and confinement	3	3	—	5	—	1	2	1	1	—	2	2	20	6
For ante-natal treatment and miscarriage	—	—	—	—	—	—	—	—	—	—	—	—	—	—
For ante-natal treatment and confinement and miscarriage	—	—	—	—	—	—	—	—	—	—	—	—	—	—
No. referred to own doctor	4	—	2	5	3	2	—	—	—	—	—	—	16	—
No. treated on district :—confinement	100	124	50	166	89	25	54	33	—	—	—	—	644	—
miscarriage	1	—	—	3	—	—	—	—	3	—	—	—	4	—

CASES TERMINATED.

	1939	1940
Alive Full Time	690	1174
Premature	18	32
Stillborn, Full Time	19	18
Premature	2	6
Abortion or miscarriage	3	5
Left district	68	100
Not Pregnant	2	8
Not terminated	179	303
Twin birth	9	11
Triplets	1	1
Maternal death	1	4

Consultative Ante-Natal Clinics are held weekly at Northampton General Hospital and fortnightly or weekly if required at Kettering and District General Hospital by Mr. R. Watson, the Council's Consultant Obstetrician.

Details of cases seen at these Clinics are as follows :—

	Northampton General Hospital.	Kettering and District General Hospital.
(a) No. of sessions	51	46
(b) No. of expectant mothers referred to Consultant Obstetrician by medical practitioners and examined by him in a consultative capacity at the Clinic	68 and 25 evacuees	Information not available
(c) No. of patients recommended for admission on account of abnormalities and supervised at the Ante-Natal Clinic (exclusive of cases entered under (b))	86 and 10 evacuees	do.
(d) No. of cases recommended for admission on account of unsatisfactory home conditions and supervised at the Clinic...	67	do.
(e) Total No. of expectant mothers who attended at the Clinic during the year	221 and 35 evacuees	42
(f) Total attendances of all cases at the Clinic	749	92

Further details with regard to Infant Welfare Centres are given below.

The Clinics organised by the Manfield Orthopædic Hospital continued their valuable work during the year, and cases were referred from time to time by the Medical Officers attending the Infant Welfare Centres. Six children under five years of age were admitted as County Council patients to Manfield Hospital. 125 children suffering from orthopædic defects were referred to the clinics for treatment.

INFANT WELFARE CENTRES.

NAME OF CENTRE.	AVERAGE NO. OF INFANTS ATTENDING PER SESSION.	AVERAGE NO. OF CONSULTATIONS PER DOCTOR'S ATTENDANCE	ATTENDANCES BY DOCTOR.	SESSIONS.
Brackley	34	26	10	11
Brixworth	41	18	9	11
Burton Latimer	32	20	10	22
Byfield	19	18	21	21
Cold Ashby	27	9	9	9
Corby	40	25	46	47
Cottingham	12	13	5	6
Daventry	10	5	11	19
Desborough	26	20	13	20
Duston	28	27	9	10
Earls Barton	13	13	9	18
Finedon	22	21	16	17
Hackleton	36	22	10	10
Higham Ferrers	33	32	10	21
Irchester	23	19	10	22
Irthlingborough	37	23	9	16
Long Buckby	16	14	10	10
Moulton	26	16	8	11
Potterspury	32	30	11	11
Raunds	34	22	10	11
Rothwell	32	30	12	23
Rushden	79	41	34	43
Towcester	19	19	12	12
Wellingborough	40	29	47	48
Wilbarston.....	10	9	7	9
Wollaston	26	19	10	21
Woodford	16	15	11	12

(ix) MILK GRANTS.

The total quantity of milk supplied by the Council amounted to 5168 gallons, and 403½ pounds of dried milk, as compared with 11,151½ liquid gallons and 926 pounds of dried milk in the previous year. The cost of the milk supplied in the financial year ended March, 1941 was £427 2s. 7d. compared with £1138 19s. 6d. in the previous year. The reduction was due to the operation of the National Milk Scheme which was introduced by the Government in July.

(x) NOTIFICATION OF BIRTHS.

The numbers of births notified in the area during the year under Section 203 of the Public Health Act 1936 were as follows :

Live births 2772 ; Still births 56 ; Total 2828.

Notified by midwives	2482
Notified by doctors and parents	346

(xi) HEALTH VISITING.

At the end of the year the staff consisted of 21 Health Visitors and one Superintendent. Two additional Health Visitors were loaned from evacuation areas. The following is a short summary of the work of the Health Visitors (excluding school nursing) :

HEALTH VISITORS' VISITS.

1. Ante-Natal	170
2. Infants	26,992
3. Children 1-5 years	30,998
4. Infant Deaths	140
5. Still births	69
6. Infant Life Protection	580
7. Boarded out (P.A.C.)	290
8. Tuberculosis cases	3,186
9. Mental Defectives	499
10. Free milk enquiries	1,380
11. Social Visits	544
	<hr/>
	64,848
	<hr/>

In addition, the Health Visitors made 664 attendances at the Infant Welfare Centres and gave 55 lectures to the mothers.

(xii) CHILD LIFE PROTECTION.

The Health Visitors continued visitation under the provisions of Sections 206 and 220 of the Public Health Act, 1936. Periodical reports have been received upon cases under their supervision. At the end of 1940, 100 foster mothers and 140 children were on the register. During the year 17 children were removed from the County, 8 were returned to the care of parents or relatives, 2 were removed to an institution, 2 were legally adopted, 6 were transferred to the care of another foster mother in the County, and in 33 cases supervision was discontinued on the child reaching the age of nine years. 580 visits were paid by the Health Visitors during the year. All reports are reviewed by the medical staff, and prompt measures are taken to investigate any case in which an adverse report is received.

(xiii) MENTAL DEFICIENCY.

The Health Visitors pay routine domiciliary visits to mental defectives who are living in good homes and whose conduct is satisfactory. Other defectives who require special supervision are visited by the Mental Welfare Officer.

(xiv) UNMARRIED MOTHERS

Under arrangements described in previous reports, 8 unmarried mothers were admitted to Homes in 1940.

(xv) CO-OPERATION WITH THE NATIONAL SOCIETY FOR THE PREVENTION OF CRUELTY TO CHILDREN.

22 cases were referred during 1940. The number of children concerned was 46, and 142 visits were made by the Inspector.

(xvi) PREVENTION OF DEAFNESS AND DEAF-MUTISM.

Under arrangements described in previous reports, 7 cases have been referred to hospitals for operation.

(xvii) DENTAL TREATMENT AND DEFECTIVE VISION.

During the year, 174* expectant and nursing mothers and 184 children under five years of age who required dental treatment, and 57 children under five who required examination for defective vision, were referred to the Staff of the School Medical Department. In addition, a number of County patients attending the Kettering Ante-Natal Clinic received dental treatment. Assistance towards the cost of dentures was given to 39 mothers.

(xviii) CONSULTANT OBSTETRIC FACILITIES.

The County Council has arrangements with Mr. R. Watson, F.R.C.S.(Ed.) F.R.C.O.G., (Consultant Obstetrician), and his services are available to medical practitioners in cases of abnormality of pregnancy and in puerperal cases. Five patients were seen at their homes during the year at the request of private practitioners compared with 21 in 1938 and 11 in 1939.

(xix) EMERGENCY UNIT.

No cases were officially treated under these arrangements.

(xx) CONTRACEPTION CLINIC.

Under arrangements described in previous reports 27 County cases were seen at the Northampton Women's Welfare Association Clinic.

(xxi) HOME HELPS.

Six cases received assistance under this scheme during the year.

GOVERNMENT EVACUATION SCHEME.

EMERGENCY MATERNITY HOMES.

As the result of the changed situation in France and the expected threat of invasion and heavy bombing, the Ministry of Health asked the County Council as Welfare Authority, to provide further accommodation to which mothers from London could be admitted for confinement. St. John's Home, Weston Favell (65 beds) which had been opened the previous year was maintained ready to receive cases at short notice. In June, 1940, East Haddon Hall was rented and prepared to accommodate 30 cases and an emergency maternity unit of 20 beds was set aside in the Infirmary Block of London Road Hospital, Kettering.

*72 of these did not attend for treatment.

The Ministry of Health found that the beds they had provided in the reception areas were insufficient to meet the demand and at the Ministry's instigation Bragborough Hall (26 beds) was taken over and opened at the end of October, while as a temporary arrangement the Castle Home of Rest at the Park Hospital, Wellingborough, was used as a Maternity Home (60 beds) from October to December.

The numbers of confinements in the Emergency Maternity Homes were as follows :

St. John's	248
East Haddon.....	114
Bragborough	52
London Road Hospital Emergency Maternity Wards ...	104
Wellingborough Park Hospital	78
	<hr/>
TOTAL	596
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Some details of the work in each of the Emergency Maternity Homes are submitted :

ST. JOHN'S HOSPITAL, WESTON FAVELL.

St. John's Hospital, was re-opened on 24th September, 1940, as an emergency maternity home. Following the valuable work done and experience gained in 1939, all preparations were complete and the hospital was soon running smoothly. This time the patients had come from heavily bombed areas ; most of them had had little sleep for three or four weeks and had spent all their nights and the greater part of their days in air raid shelters. Patients were remarkably cheerful but were most appreciative of rest in bed and good food. Apart from those who had lost their homes, many had been without gas and water for weeks, making house-keeping extremely difficult.

There arrived at St.Giles Clinic, Northampton, 120 mothers on the first day and subsequently 20-25 each week up to the end of the year. Of the first arrivals, eight were immediately admitted to St. John's on medical grounds, the others being billeted in the borough and county. Later on the Borough Council opened two ante-natal hostels to accommodate 20 or 30 expectant mothers. These were a great success and much appreciated. Two ante-natal clinics each week were arranged at the County Health Department to deal solely with the evacuees. The average attendance was 27 per session, and the total attendance at the clinics was 650. Most of the mothers were sent out of London a month before the expected date of confinement. In addition to the necessary medical supervision of the clinics, every effort was made to adjust minor difficulties and worries for these women.

Dr. Marjorie Williams, who was on the staff as a temporary Assistant School Medical Officer was appointed Resident Medical Officer. Miss Clayton, the Matron, was again in charge of the administration of the Home but the nursing staff was recruited from the London County Council Hospitals, and was under the direction of Sister Little.

Special praise should be given to the nursing staff for the splendid way in which they have worked. All had come from bombed hospitals, having spent their nights in basements and corridors and their days in hard work. Meals had been taken at irregular hours and had been frequently interrupted by air raid alarms.

Eight pupils were included in the staff and these continued their lectures at the Barratt Hospital through the courtesy of Mr. Watson.

The average stay in hospital after confinement per patient was fourteen days. Every effort was made to persuade mothers to return with their babies to billets in Northampton, and as long as heavy raids continued a large proportion was prepared to do so. Some of them, although anxious to do their best for their babies were unable to stay for economic reasons. Heavy rents in London combined with separate housekeeping expenditure for husband and wife and contributions towards the upkeep of evacuated children made it quite impossible.

A convalescent home was opened by the Borough Council where mothers, recommended on medical grounds, could be transferred for two to three weeks before returning to normal life. This home was also used for temporary accommodation for those difficult to billet. Despite their trying and harrowing experiences most left Hospital in very good health. All babies were well up to standard and there were only three premature births out of a total of 248. No maternal death occurred. One patient had a severe post-partum hæmorrhage which was skilfully treated by Mr. Watson and a timely blood transfusion. It should be stated that this was in no way a result of wartime conditions as the patient had similar trouble with each of her three previous confinements. Two infants died, the deaths being attributable to prematurity and congenital defects. The number of stillbirths was below the average.

Considerable difficulty has been experienced throughout in establishing lactation and this was more apparent during December. 43 patients have been given Lactagol and with two exceptions, marked improvement followed. In most cases full breast feeding resulted, but 22 babies have required complementary feeds for which half-cream Cow and Gate has been used with very satisfactory results. Cow's milk and water was used in a number of cases but the results proved disappointing. Dried food has been considered easier for evacuee mothers to handle in billets and also for those returning to London. Six babies were discharged from hospital artificially fed. In two cases of heart disease, breast feeding was considered inadvisable. One patient had a fractured clavicle two days before delivery and the breasts failed to secrete. The fourth patient had a severe post-partum hæmorrhage and lactation was never established, and the remaining two were elderly multipara, who had never breast fed their infants and in whom lactation was not established despite every effort made.

For successful breast feeding, a placid contented state of mind is essential in the mother. Lactation difficulties, it is thought, may be largely attributed to enemy action.

The following notes gives some indication of the work done :

ST. JOHN'S EMERGENCY MATERNITY HOSPITAL.

24th September to 31st December, 1940.

Total number of deliveries : 248.—Male, 131 ; Female, 117.

Primipara, 118.

Normal deliveries, 236.

Vertex presentations, 230.

Breech presentations, 6.

Abnormal deliveries.

Breech with extended legs, 3

Forceps, 12.

- Occipito posterior, 2.
- Contracted pelvis, 2.
- Disproportion, 1.
- Heart Disease, 2.
- Secondary inertia, 2.
- Primary inertia, 1.
- Foetal distress, 2.

Prolapse of cord—1 case.

Multipara—terminated spontaneously, living infant, asphyxiated, but responded to treatment.

Impacted Shoulders—2.

- One terminated normally.
- One stillbirth—infant 11lb. 12ozs. Very short cord (14").

Ruptured Perineums—51.

- 1st degree, 20 (one suture only).
- 2nd degree, 21.
- Old scar tissue, 10.

Episiotomies—4.**Post partum hæmorrhage—2.**

- One severe—manual removal of placenta, and blood transfusion.

General anaesthetic—20.**Patients transferred to Barratt Hospital—2.**

1. Obstructed labour for caesarian section.
2. Oblique lie—no foetal heart heard—for X-ray *re* abnormal foetus. Subsequently delivered at Barratt Hospital spina-bifida.

Stillbirths—4.

1. Macerated foetus. Toxæmia in mother.
2. Impacted shoulders, infant 11lb. 12oz.
3. Toxæmia (transferred from Wellingborough).
4. 2nd twin rapid expulsion, white asphyxia, probably subtentorial tear.

Infant deaths—2.

In both cases congenital obstruction of bile ducts—jaundice.

One infant showed signs and symptoms of pyloric stenosis, subsequently transferred to General Hospital for operation.

Sticky eyes—8.

- One infant had septic spots.

ANTE-NATAL CASES ADMITTED TO HOSPITAL.**Toxæmia—20 cases.**

With one exception all these pregnancies terminated normally and all infants were healthy. One patient had a stillborn macerated foetus.

Heart Disease—9 cases.

With one exception patients were admitted to Hospital for rest before delivery. 7 were delivered normally and 2 terminated by forceps.

Cases seen by Mr. Watson at St. John's—5.**Cases referred to Mr. Watson's Out-Patients Department—8.****Puerperal Pyrexia—23 cases.**

19 cases temperature normal after 36 hours.

1 case pyelitis.

1 case cystitis.

4 cases mastitis.

1 case mastitis—breast abscess.

1 case phlebitis.

1 case following difficult forceps delivery.

3 cases subinvolution.

10 cases coryza.

1 unexplained pyrexia (patient seen by Dr. Lord who reported lungs and heart normal).

Phlebitis—3.

One accompanied by pyrexia 48 hours.

EAST HADDON.

The house needed very little alteration or adaptation and was equipped ready for opening in the event of evacuation, with the assistance of Mrs. St. John Mildmay, Commandant and the East Haddon St. John Nursing Division, who were to provide cooking and domestic staff for the Home. A complete nursing unit from the Plaistow Maternity Hospital, East Ham, under Miss Lack as Sister in Charge, was designated to the Home. Arrangements were made by Brixworth Rural District Council to billet 60 expectant mothers in East Haddon and Ravens-thorpe. The Home was opened on the 15th September when Miss Lack, three midwives and six pupils, together with 40 mothers arrived by coach from London. Subsequently, mothers were sent down in groups of 10-20 every week.

The Home was soon working smoothly, thanks very largely to the keen interest of the voluntary helpers, the good work of the billeting officers and the kindness of the villagers.

The ante-natal care and general supervision of the Home was carried out by Dr. Dickson, who visited at least twice a week; Dr. E. W. Atkinson of Long Buckby, consented to attend in emergency on receiving call for medical aid at the usual fee. Dr. Starkie kindly arranged for sterilisation of dressings to be carried out at Creton Sanatorium.

Women were assessed for payment in the same way as those entering the maternity ward at the Barratt Maternity Home, the fee being collected, whenever possible, before they left the Home.

A few mothers wished to remain in the neighbourhood after delivery, some were still there at the end of the year but most of them returned to London on discharge from hospital or within a few weeks. 146 women were sent from London, of these 11 returned undelivered, in addition 7 cases were treated at the hospital who had evacuated privately or under the scheme for mothers and toddlers.

There were 114 deliveries, 66 of whom were primary gravida, 111 babies were born alive, including breech twins. There were 4 still births, all abnormal foetuses. Three cases were

transferred to Barratt Maternity Home for obstetric abnormalities. Two were referred to Consultant at Northampton and two were seen by him in the Home.

Three babies had watery eyes, one had septic fingers.

There were three cases of puerperal pyrexia and one of breast abscess, none of these required removal.

Three Obstetric Abnormalities.

Extended breech, 1.
Face presentation, 1.
Ruptured perineum, 13.

Arrangements were made for pupil midwives to attend Mr. Watson's lectures at the Barratt Maternity Home.

BRAGBOROUGH HALL.

To meet the increasing demand for maternity beds, Bragborough Hall was rented from Mr. Hopley and was equipped and opened in ten days. Many of the alterations and furnishings were far from complete when the Home was opened on 29th October. The staff was sent as a complete unit from the Salvation Army Mothers' Hospital, Clapton, under Miss Clewlow as Sister in Charge. Mothers were sent in parties by 'bus from London and were billeted in Daventry Borough and Rural District. Many difficulties arose as there was already a large number of child evacuees, and suitable billets were not easily found. Transport to the Home was by car and ambulance with attendance for ante-natal supervision at Daventry owing to poor 'bus facilities.

90 women were sent from London, 16 returned undelivered (10 within a week of being sent down). 1 case was admitted from the district.

There were 52 deliveries, 31 primiparal, 1 set of twins.

Four cases were referred to the Consultant Clinic. Two of these cases were admitted to Barratt Maternity Home for caesarian section, and one to St. John's Maternity Home where she had a normal delivery. One case of post partum hæmorrhage was seen at the Home by the Consultant and subsequently transferred to Northampton General Hospital.

There were three cases of watery eyes, one case of ophthalmia neonatorum seen at Northampton General Hospital and cured before discharge.

Obstetric Abnormalities.

Forceps deliveries, 2.
Ruptured perineum, 14.
Ruptured old scar tissue, 4.

The pupil midwives of the unit were all taking part II and did not require medical lectures.

Dr. S. V. Brown consented to answer calls for medical aid, but the ante-natal care and general supervision was by Dr. Dickson.

LONDON ROAD HOSPITAL, KETTERING.

A maternity unit was equipped in the Infirmary block at this Institution, staffed by sisters and midwives from the London County Council.

The reception, billeting and ante-natal care was in the hands of the Kettering Borough Authorities. Dr. Notley, the Visiting Medical Officer, undertook the necessary medical care and supervision of the block. The unit was opened on the 23rd September, 1940.

104 women were confined, of whom 47 were primary gravida. 106 babies were born, there was one infant death.

Obstetric Abnormalities.

Forceps deliveries, 5.
Breech deliveries, 5.
Ruptured perineum, 31.
Manual removal of placenta, 1.
Post Partum Hæmorrhage, 2.
Puerperal pyrexia, 3.
Infants sticky eyes, 1.

PARK HOSPITAL, WELLINGBOROUGH.

Owing to pressure on maternity beds, the Castle Home of Rest block at the Park Hospital was closed to military sick and opened for two months with 60 maternity beds. Equipment was kept to a minimum as the arrangement was never intended to be permanent. A staff of individual midwives was sent by the Ministry of Health and the block was administered by the Charge Sister of the Park Hospital under Mrs. Bannister, the Matron.

One party of 94 mothers was sent down from London on the 25th October. They were given a meal and were seen at the Home by Dr. Percival, the Resident Medical Officer in charge of the block and other members of the public health staff. Billeting in Wellingborough proved very difficult, in fact the majority of the women spent the first night at the Y.M.C.A. Rest Centre, but subsequently most of them settled down very comfortably and only 14 returned to London before they were confined. Ante-natal care was carried out at a special clinic at the Rock Street Health Centre by Dr. Williams and Dr. Percival. There were 78 births, 36 primiparal. There were two infant deaths, one from pneumonia and the other from cerebral hæmorrhage. Two cases were referred to the Barratt Maternity Home for delivery, one of these died of obstetric shock following Caesarian Hysterectomy. One case was delivered in St. John's Emergency Maternity Home, Weston Favell, after the unit had closed.

There were three cases of sticky eyes. One notified Ophthalmia Neonatorum seen by Ophthalmic Surgeon which responded to treatment. Three children had septic spots.

Obstetric Abnormalities.

Post Partum Hæmorrhage, 1.
Normal breech, 3.
Ruptured perineum, 21.
Ruptured scar tissue, 11.
Episiotomy, 4.

RESIDENTIAL NURSERY PARTIES.

At the end of the year the following residential nursery parties for evacuee children under five years of age were supervised by medical members of the staff—Fermyn Woods Hall (W.V.S.), Kelmars Hall (North Hampstead and St. Pancras Day Nursery), and a Nursery School at Eydon Hall (Somerstown Nursery School).

The Nursery Party at Wakefield Lodge (Shoreditch Day Nursery) was transferred in September to Nottinghamshire.

HOSTELS

For Difficult Evacuee Children.

At the request of the Reception Authorities in the Administrative County and with the concurrence of the Ministry of Health, hostels were established in various districts for the reception and treatment of unaccompanied evacuee children who, by reason of their low standards of personal hygiene or misbehaviour could not be accommodated in ordinary billets.

The adaptation, equipping and staffing of the hostels, which were opened at the end of the year, presented many difficulties. The majority of the houses requisitioned required the expending of considerable sums of money on the provision of additional sanitary accommodation, redecoration and hot water supplies. It may be said that the best use was made of the available accommodation, but it should be borne in mind that the rate of wear and tear on the premises and equipment by numbers of difficult children as contrasted with the normal number of occupants must, of necessity be high. In consequence the cost of maintaining the hostels in a satisfactory condition must be in proportion to the number of occupants, and their standards of behaviour.

Some delay in commissioning the hostels resulted from unforeseen difficulties which arose in obtaining the necessary equipment from the Ministry of Health. Much of the equipment was eventually bought locally with the approval of the Ministry. The management of the hostels calls for very hard work by the staff.

The hostels are supervised by the Evacuation Hostels Joint Sub-Committee which was appointed jointly by the Public Health Committee and the Education Committee, at the request of the County Emergency Committee on the 23rd September, 1940. The Sub-Committee have met on a number of occasions and the periodic visits made by the members to the hostels are most helpful in solving difficulties associated with administration by gaining first hand knowledge of the manifold problems.

The executive work has been carried out by the Deputy County Medical Officer of Health and much valuable assistance has been rendered by the County Public Assistance Officer and his staff in equipping and provisioning the various hostels.

The supervision of the hostels is an arduous task and takes up considerable time of the Public Health Department staff. In order that the admission of children should be fully justified and the best use made of the available accommodation requests for admission of children to hostels by the Billeting Officers of the County Districts were made to the County Health Department.

The children admitted to the hostels suffered from certain mental symptoms and physical concomitants arising as a result of lack of adaptation to environment ; whether the latter can be attributed to home surroundings or local environment it is very difficult to say, but the children admitted may be classified into the following groups in order of their frequency :

1. Enturesis, faecal incontinence.
2. Behaviour problems, such as disobedience, sleepwalking, night terrors, spite, stealing.
3. Anxiety.

Possible causes may be (a) endogenous or (b) exogenous. The former in some cases were due to frank mental deficiency and the latter may be attributed to (1) neglectful parents (2) the influences of poor environment (3) the feeling of insecurity arising from sudden shock of strange environment (4) unsuitable billets (5) the carping attitude of some parents who by their frequent visits and lack of tact made life unhappy for their children (6) bombing (7) the obvious

neglect of parents to provide adequate clothing. The evacuee child and his parents have been indicted as one of the main causes of the social problems arising from the disruption of the family unit in the evacuation areas and its disturbance in the reception areas. On the other hand, there have been numerous practical Christian acts demonstrated by billetors,, who have accepted into their family circle the bombed-out stranger and treated him as one of their own flesh and blood.

Such cases are investigated by a Medical Officer, Probation Officer, County Mental Welfare Worker or Health Visitor before admission and the actual admissions authorised after careful consideration by the Health Department. The following table shows details of admissions and dismissals from the various hostels :

HOSTELS—ADMISSIONS AND DISMISSALS.

Hostel	Commissioned	Admissions			Dismissals			Complaints					
		<i>Girls Boys T'tal</i>			<i>Girls Boys T'tal</i>			<i>Enuresis</i>			<i>Problem Child'n</i>		
Rushden	1st Oct., 1940	23	5	28	13	1	14	12	5	17	11	—	11
Daventry	21st Oct., 1940	2	21	23	2	4	6	1	12	13	1	9	10
Burton Latimer	11th Nov., 1940	—	21	21	—	6	6	—	17	17	—	4	4
Northampton	11th Nov., 1940	7	2	9	1	—	1	6	1	7	1	1	2
Wellingborough	3rd Dec., 1940	9	5	14	—	—	—	4	8	12	1	1	2
Total		41	54	95	16	11	27	23	43	66	14	15	29

The experience of the work done in the hostels during 1940, although limited, justifies the statement that, not only did they perform an essential function in the operation of the Evacuation Scheme, but the results in so far as the individual children were concerned were extremely satisfactory. Many children with previous bad records of behaviour or persistent bedwetting, improved within a few days of admission : in my opinion, the results are entirely due to the friendliness and sympathetic attitude of the staff who, however, knew when and how to exert control and the child who had previously shown symptoms of insecurity soon became aware that in the Master or Matron in charge of the hostel he had found someone to take the place which every normal parent occupies in the life of his children.

SECTION C.

Sanitary Circumstances of the Area.

1. WATER SUPPLY.

General. The County Council's Policy, under Section 307 (1) of the Public Health Act, 1936, was continued during the year 1940, and grants were approved in respect of the following schemes :

	<i>Estimated cost of scheme</i>
1. <i>Towcester Rural District.</i>	
Silverstone and Whittlebury	£8,675 -
2. <i>Brackley Rural District.</i>	
Croughton	£1,850

A noteworthy development under this heading is the extension of chlorination to all water undertakings, except perhaps, in the case of small undertakings supplying fewer than 1,000 people. Circ. 2086, July 1940, and Memorandum No. 221, January 1939 of the Ministry of Health sets forth the steps to be taken in the safeguarding of water supplies.

In a Report of the Ministry of Health No. 71 (Revised Edition) 1939, it was stressed that each water undertaking should take expert advice on the minimum of samples necessary in order that an effective watch can be maintained on the condition of the water from each of the sources from which it is drawn, and on the state of the water as it reaches the consumer. "A single laboratory examination of water, however favourable the result, does not justify the conclusion that all is well and the supply is suitable for drinking purposes." In addition to sampling, it is suggested that it is of equal, if not greater importance that there should be extensive personal knowledge of the gathering grounds, reservoirs, etc., and the Ministry of Health in Circ. 1684 (March 12th, 1938) drew attention to the need for close co-operation between the Water Committee and its officers and the Public Health Committee and the Medical Officer of Health. This is all the more necessary now in view of war conditions.

2. DRAINAGE AND SEWERAGE.

General. The County Council agreed, during the year 1940, to grant assistance under Section 307 (1) of the Public Health Act, 1936, towards the cost of the following schemes of sewage disposal :

	<i>Estimated cost of scheme</i>
<i>Brackley Rural District.</i>	
Aynho	£1,177
Eydon	£1,480
<i>Daventry Rural District.</i>	
Long Buckby (revised grant)	£20,314

SECTION D.

Housing.

Circ. 2156 (September, 1940) denotes the approval by the Ministry of Health of a six monthly licence for local authorities resuming the use of condemned houses. This approval has been given owing to the destruction of other houses and to the suspension of housing schemes in consequence of the war. While, however, it would be unsound to in any way hamper the war effort, it is essential that a strict vigilance should be kept to prevent overcrowding.

HOUSING (RURAL WORKERS) ACTS, 1926-38.

The County Land Agent has informed me that the only application under the above Acts during the year 1940 related to a cottage in the parish of Braybrooke. A grant of £100 was approved.

SECTION E.

Inspection and Supervision of Food.

1. MILK SUPPLY.

MILK (SPECIAL DESIGNATIONS) ORDERS, 1936 and 1938.

As the war continues the value of milk as an article of diet for expectant and nursing mothers and for young children is becoming increasingly recognised and it is accordingly considered that, in spite of difficulties in connection with petrol rationing and travelling in the "black-out", every effort should be made to maintain the supervision of the methods of production at Tuberculin Tested and Accredited Farms. The administration of the Milk (Special Designations) Orders is part of the campaign for clean milk production, and clean milk is undoubtedly more essential than ever since we cannot afford to lose supplies from rapid souring due to dirty methods.

The difficulties that the farmers have to face have been recognised. Not only have they lost skilled workers and been unable to obtain normal supplies of fuel for sterilising, but they have had to divert labour to "ploughing up" and all the other activities required to produce more food. Allowance had to some extent to be made for these difficulties, which, however, were not found to be so great as to prevent producers who were prepared to make reasonable efforts, from being able to comply with the conditions of the Orders and to produce clean milk.

During the year 1940, the County Council granted 6 Tuberculin Tested and 34 Accredited licences; in the same period 4 Tuberculin Tested and 23 Accredited milk producers relinquished their licences or removed. At the end of the year there were 28 Tuberculin Tested and 343 Accredited licences in force in the County, a slight increase over the previous year. In addition, 3 licences to bottle Tuberculin Tested milk and 1 to bottle Accredited milk were granted, making a total at the end of the year of 14 producers licensed to bottle Tuberculin Tested milk and 16 producers licensed to bottle Accredited milk.

Of the 28 Tuberculin Tested herds in the County 15 were, at the end of the year, entered in the Register of Attested Herds of the Ministry of Agriculture and Fisheries."

There were 4,024 samples of Tuberculin Tested and Accredited milk collected and examined during the year, an increase of 51% over the previous year, of which 2,864 (or 71%) were satisfactory: in calculating this percentage *all* unsatisfactory samples are taken into account including repeat samples from farms at which the methods of production are not up to standard. The great increase in the number of samples taken has been due to the policy inaugurated at the beginning of 1939 of obtaining as many samples as possible from collecting depots. Indeed in 1940 approximately 60% of all samples were taken at depots, the remaining 40% being obtained at farms at milking times.

It was necessary to submit to the Special Quorum appointed by the Public Health Etc. Committee, reports concerning five producers whose methods of production were not satisfactory. The licences of three producers were suspended without qualification and in the other two, suspension was decided upon until such time as the licensees could submit three satisfactory samples within a period of two months: of the latter, one farmer has regained his Tuberculin Tested licence and the other has not so far re-applied.

NON-DESIGNATED MILK SUPPLIES.

Under the Milk and Dairies Order, 1926, 1,434 samples were taken by District Sanitary

Inspectors for examination for bacterial cleanliness by the Methylene Blue Test at the County Laboratory ; these gave the following results :

Good—888 or 62%.

Moderate—282 or 20%.

Bad—264 or 18%.

MILK AND DAIRIES ACTS AND ORDERS.

The following table gives a list of inspections carried out during the year by the Veterinary Inspectors of the Ministry of Agriculture and Fisheries, and shows the number of cows destroyed on account of tuberculous infection :

INSPECTION OF DAIRY COWS

(a) Clinical Inspection :

	<i>No. of Herd Inspections.</i>	<i>No. of cattle examined.</i>	<i>No. of cattle dealt with under the Tuberculosis Order.</i>
" Tuberculin Tested " and " Certified "			
Herds	66	5625	1
Accredited or Standard Herds	1276	31260	—
Non-designated Herds	2546	30788	5

(b) Tuberculin Testing of " Tuberculin Tested " and " Certified " Herds :

No. of cattle tested	5660
No. of Reactors found	235

(c) Tracing sources of tuberculous milk :

No. of cases outstanding from previous quarters	3
No. of fresh reports from Medical Officers of Health	2
No. of herds involved	5
No. of cases of tuberculosis of the udder found	2
No. of cases outstanding at end of quarters	1

TUBERCULOSIS (ATTESTED HERDS) SCHEMES.

No. of Attested Herds	64
No. of Supervised Herds	9

TUBERCULOUS MILK—VETERINARY INVESTIGATION.

Only one case came under consideration during the year in respect of samples of milk found to be tubercle-infected taken outside the Administrative County from supplies from County producers.

This was in respect of a sample of milk taken in the County Borough of Northampton from a supply from Kislingbury. The animal responsible for the positive sample was traced by the Divisional Inspector of the Ministry of Agriculture, and was slaughtered under the Tuberculosis Order of 1938.

2. MEAT AND OTHER FOODS.

PUBLIC HEALTH (PRESERVATIVES IN FOOD) REGULATIONS, 1925-27.

Of the 561 samples submitted for analysis under the Food and Drugs Act, 485 were examined for the presence of a preservative.

No sample of milk contained preservative or colouring matter and no prohibited preservative was found in any of the other foodstuffs analysed.

During the year an Order made by the Minister of Food under the Defence Regulations 1939, permitted the use of boric acid in margarine in an amount not exceeding 0.25 per cent. Of the 21 samples of margarine examined, 6 contained boric acid in amounts well within this limit.

One sample of pork sausage contained sulphur dioxide preservative and this was also in an amount well within that permitted.

3. ADULTERATION, etc.

FOOD AND DRUGS ACT, 1938.

During the year, 561 samples have been submitted under the above Act, and of this number of samples 544 were formal and 17 informal. 65 samples, with one exception all milks, were reported against as being either adulterated or below standard.

The list of samples taken is as follows :—

Milk	443	Brought forward	525
Skimmed Milk	2	Glace Cherries	1
Separated Milk	4	Prunes	1
Butter	26	Ground Almonds	1
Margarine	21	Chicory and Coffee extract ...	1
Dairy Cheese	1	Coffee	2
Cream Cheese	1	Tea	2
Lard	9	Milk Cocoa with Sugar	1
Lardex	1	Sweetened Cake Flour ...	1
Cooking Fat	7	Jams	17
Beef dripping	1	Lemon Curd	1
Shredded Suet	2	Golden Glucose Syrup	1
Potted Meat	1	Honey Sugar	1
Chicken and Ham Paste	1	Tinned Peas	3
Sausages	3	Malt Vinegar	2
Mincemeat	2	Throat and Chest Protector	1
	<hr/>		<hr/>
	525		561
	<hr/>		<hr/>

Extracts from the Annual Report of the Public Analyst.

“ MILKS. Of the 443 milks that have been submitted, 38 were taken as “ Appeal-to-cow ” samples in connection with milks adversely reported upon, thus making a total of 405 milks taken in ordinary routine course.

64, or 15.8 per cent, of the milks were either adulterated or below standard, which is an increase on the corresponding figure of 13.8 per cent for 1939. This increase in the adulteration of such a valuable foodstuff as milk is to be deprecated, more especially in war time with the County carrying the additional burden of evacuated families to feed.

The form of adulteration or deficiency was as follows :

Added water	19 samples.
Deficiency in fat	30 samples.
Deficiency in solids-not-fat but with no evidence of added water	15 samples.

It has been shown on many occasions that it is not right that a conclusion should be reached as to the presence of added water purely on a deficiency of solids-not-fat and mineral matter. With the poor quality of some feeding stuffs on the market very conclusive evidence is needed for one to be satisfied without any possible doubt that water has been added, and that the milk is not just a naturally poor one. At the same time it must be clearly realised that however bad a foodstuff may be it is a physical impossibility for a cow to add extraneous water to its own milk. This form of sophistication is one that can never be blamed on the beast and may be regarded as one that rests exclusively with an act of the human being.

Additional evidence, such as a determination of the freezing point, refraction of the serum and presence of nitrates has to be obtained. With all these tests definitely against the milk, and at the same time backed up by an "appeal-to-cow" being normal, then there is no possible doubt whatever that water has been added, and the farmer or milk supplier who adds water to milk, be it 1 per cent. or 50 per cent, deserves to be treated with no leniency whatever. It is a mean and miserable form of fraud and one very difficult for the housewife to detect."

"Appeal-to-Cow" samples. In connection with the foregoing samples 38 were submitted as "appeal-to-cow" and of these, 22 were found to be of good quality. Of the remainder, 6 were deficient in fat and 10 were deficient in solids-not-fat.

Proceedings were instituted in each case of added water with the following results :

16.1 per cent. Added Water.	Fined £5/0/0 and 10/6 costs.
13.4 per cent. Added Water.	Fined £1/0/0 and 10/6 costs.
8.2 per cent. Added Water.	Fined £6/0/0 and £1/19/0 costs.
8.1 per cent. Added Water.	All three samples taken on delivery from the producer.
4.2 per cent. Added Water.	
12.1 per cent. Added Water.	Fined £50/0/0 (£5/0/0 in each case) and £14/14/0 costs.
9.2 per cent. Added Water.	All ten samples procured from the same producer on various dates.
8.2 per cent. Added Water.	
6.2 per cent. Added Water.	
6.1 per cent. Added Water.	
6.0 per cent. Added Water.	
2.7 per cent. Added Water.	
2.3 per cent. Added Water.	
Added water present.	
Added water present.	
13.8 per cent. Added Water.	Fined £2/0/0 and £1/1/0 costs.
7.6. per cent. Added Water.	Fined £2/0/0 and 10/6 costs.
6.7 per cent. Added Water.	Fined £1/0/0.
9.6 per cent. Added Water.	Fined £1/0/0 and £1/10/6 costs.

In connection with the 30 samples deficient in fat, which is a decrease of 11 such samples on 1939, 6 "appeal-to-cow" samples were also below the presumptive standard for fat and several others contained the bare minimum. In one instance proceedings were instituted for an 11.6 per cent. deficiency in fat and in this case the "appeal" was satisfactory and the producer retailer had previously been warned. The case was dismissed on payment of 4/0 costs.

The average fat content of all milk samples (excluding those containing added water) taken during the year was 3.70 per cent., as compared with 3.66 per cent., for the preceding year, and varied with the seasons of the year as follows.:

First Quarter.....	3.87 per cent.
Second Quarter	3.46 per cent.
Third Quarter	3.65 per cent.
Fourth Quarter	3.93 per cent.

MILK IN SCHOOLS.

The taking of informal samples of milk supplied to schools within the County was continued during the year, 85 samples having been taken and tested by the Inspectors. This figure represents suppliers, as in several instances one supplier serves several schools and samples are not taken from each school so supplied on a satisfactory sample having already been taken. For various reasons connected with the difficulty of supply several schools were, at some period of the year, unable to obtain milk for the scholars.

The results of the testing of the 85 samples were very satisfactory and following up formal samples were only needed to be taken in two doubtful cases, in both of which the milk was found to be genuine. The average fat content of the school milk samples was 3.68 per cent.

SAMPLES OTHER THAN MILK.

Of the 112 samples other than milk, 82 were of rationed foodstuffs or foods of everyday household use, *viz.*, butter, margarine, lard, cooking fat and jam. It is gratifying to report that these and 39 miscellaneous foodstuffs were reported to be genuine and as described.

The one exception was a sample of Milk Cocoa with Sugar, which was described on the package as being " specially prepared from pure milk, cocoa and sugar ". The sample was adulterated with 17.11 per cent. starchy matter and approximately half the sweetening medium was saccharin. Starch is not natural to milk, cocoa or sugar, and must have been added for the purpose of increasing the bulk and weight of the material. Whilst no general exception can be taken to the use of saccharin, the description of the article was held to give the impression that sugar was the only sweetening medium.

The sale of the article was traced from the retailer, through a secondary wholesaler and a primary distributor, to the manufacturers, the latter being proceeded against for applying a false label to the article. A plea of " guilty " was entered and a fine of £5/0/0 and cost of £13/9/6 were ordered to be paid.

The percentage of total samples reported against and the results of the action taken is shewn in the following table :

<i>Year.</i>	<i>Samples submitted for analysis.</i>	<i>Samples reported against: Number.</i>	<i>Percentage.</i>	<i>Amount of fines and costs in prosecutions.</i>
1936	596	61	10.2	£3 11 6
1937	551	68	12.3	£52 13 6
1938	579	75	12.9	£13 13 6
1939	573	62	10.8	£24 3 0
1940	561	65	11.6	£107 9 6

No action was taken under the Public Health (Condensed Milk) Regulations, 1923 and 1927, or the Public Health (Dried Milk) Regulations.

SECTION F.

Prevalence of, and Control over, Infectious and other Diseases.

1. ISOLATION HOSPITAL ACCOMMODATION.

Under the Scheme for the provision of adequate hospital accommodation the County is divided into three areas, *viz.* Western, Kettering and Eastern, and hospitals are situated at Staverton, Kettering and Wellingborough respectively. The hospitals are in each instance administered by joint hospital boards. In consequence of the War, building operations in connection with additions and extensions to hospitals were not proceeded with.

2. INFECTIOUS DISEASES AND VACCINATION.

Smallpox. No case was notified.

Vaccination. The statistics of vaccination for 1939 (the latest year available) show a slight increase in the number of successful vaccinations in the Administrative County, the percentage of successful vaccinations to registered births being 11.7 as compared with 9.5 for the year 1938. The highest percentages of vaccinations were in the Guardians Areas of Brixworth (19.3) and Daventry (18.1 and the lowest in the Guardians Area of Wellingborough (4.4).

Scarlet Fever. 341 cases were notified as against 200 in the year 1939. With the exception of one week, cases occurred in each week, 62 per cent. being notified in the last half year. The highest numbers occurred in the following districts: Kettering Borough 54, Brackley Rural 32, Brixworth Rural 32, Daventry Rural 31, and the only districts entirely free of the disease were Higham Ferrers Borough and Raund Urban. There were no deaths.

Diphtheria. 180 cases were notified as compared with 73 in the year 1939, 63 per cent occurring in the second half of the year. These were distributed over 15 districts, the highest numbers occurred in the following districts: Brixworth Rural 36, Northampton Rural 26, Oundle and Thrapston Rural 26 and Burton Latimer Urban 22. There were 13 deaths against 2 deaths in the year 1939.

Enteric Fever (including Paratyphoid). 210 cases were notified as against eight in the year 1939. 89 of these were in Kettering Borough, 36 in Wellingborough Urban District, 20 in Rushden Urban District and 19 in Corby Urban District—14 districts in all were affected. There were two deaths against none in the year 1939.

A serious outbreak of Paratyphoid B. Fever involving 189 cases of which one was fatal occurred during the period of June to September, in the eastern districts of the County with the heaviest incidence of infection in the Borough of Kettering. This outbreak had its origin in a bakery which supplied branch shops in the districts concerned, and the peccant foodstuff was cream buns. The evidence available showed conclusively that the vehicle of infection was natural cream.

The cases clinically were moderately severe and it was noteworthy that some cases showed a meningeal onset. A number of young children were infected, and in them the rash was profuse. It was not possible to obtain hospital accommodation for all cases but the available beds in the Borough of Northampton Isolation Hospital and the newly constituted Joint Isolation Hospitals were pooled so that the best use could be made of the available beds.

Some Medical Officers of Health of the Districts involved made use of the Emergency Public Health Laboratory at Leicester for the examination of specimens. The assistance and advice given by the Bacteriologist from the Laboratory was much appreciated by all concerned and

certain advantages did accrue from the bacteriological work being co-ordinated by the one Laboratory.

Much painstaking and careful field and clinical investigation was carried out by the Public Health departments involved and this work was facilitated by conferences of the Medical Officers of Health concerned so that there was a continuous inter-change of information regarding all suspect and proved cases.

Erysipelas. 101 cases were notified as against 70 in the year 1939.

Measles. 6273 cases were notified. Cases occurred in each week, 79 per cent during the second half of the year. With the exception of Rothwell, Desborough, Oundle and Corby which had only relatively few cases, all districts suffered rather severely. There were seven deaths against none in the year 1939.

Whooping Cough. 487 cases were notified, 69 per cent in the first half of the year. The districts with the largest numbers of cases were Wellingborough Urban 167, Kettering Borough 76, Oundle and Thrapston Rural 67, Burton Latimer Urban 38, Wellingborough Rural 25 and Rushden Urban 22. Daventry Borough and Oundle Urban had no cases. There were seven deaths against two deaths in the year 1939.

Diarrhoea. (under 2 years of age). Seven deaths occurred against 10 deaths in the year 1939.

Puerperal Pyrexia : Ophthalmia Neonatorum. These diseases are dealt with under " Maternity and Child Welfare " in Section B. of this report.

Influenza. 51 deaths occurred as against 55 in the year 1939.

Pneumonia. (Acute Primary and Acute Influenzal) 265 cases were notified as against 167 in the year 1939. Cases occurred in each week (except one week) 66 per cent being notified in the first half of the year.

The deaths from *all forms* of Pneumonia amounted to 164 as against 99 in the year 1939.

Acute Poliomyelitis : Polio-Encephalitis. Four cases were notified and there were two deaths as against neither case nor death during the year 1939.

Cerebro-Spinal Fever. 28 cases were notified with 14 deaths as against three cases and two deaths in the year 1939.

Encephalitis Lethargica. No case was notified.

Malaria (contracted abroad). No case was notified.

Dysentery. 17 cases were notified.

School Closures. No schools were closed on account of infectious diseases.

Home Nursing of Infectious Cases. In addition to cases of Puerperal Pyrexia and Ophthalmia Neonatorum, the following cases were nursed in their homes : Influenza 344, Pneumonia 101, Measles 90, Infantile Diarrhoea 37, Whooping Cough 11. Nursing care was also given to several other cases not provided for in the arrangements with the Northamptonshire Nursing Association.

3. CANCER.

The facilities for treatment in the County were fully described in the Annual Report for the year 1936.

The total deaths in the Administrative County from Cancer amounted to 433 (231 males and 202 females) as compared with 404 in the year 1939. The Urban Districts had 212 deaths and the Rural Districts 221 deaths.

The death-rate for the County during 1940 was 1.79 per 1,000 of the population as against 1.76 for the year 1939 and as against 1.72 for England and Wales for the year 1940.

4. TUBERCULOSIS.

After the lamented death in March, 1940, of Dr. Crane, who had been Medical Superintendent of Rushden House Sanatorium for 19 years, the opportunity was taken to re-organise the Tuberculosis Department in accordance with modern principles. Dr. G. B. Lord the Clinical Tuberculosis Officer in charge of the dispensaries was given the additional appointment of Medical Superintendent of the Sanatorium so that all branches of tuberculosis, dispensary diagnosis, sanatorium treatment, and after care are now under the supervision of one officer. An Assistant to the Resident Medical Officer at the Sanatorium was also appointed in place of the former Junior Resident Medical Officer. The tuberculosis medical staff was accordingly reduced from three—namely, a Medical Superintendent and a Junior Resident Medical Officer at the Sanatorium and the Clinical Tuberculosis Officer at the dispensaries—to two. The new arrangements should make for a more efficient scheme.

The following figures compiled from the Returns of the District Medical Officers of Health, show the position of the County as regards existing cases of Tuberculosis at the end of the year 1940.

<i>Pulmonary.</i>			<i>Non-Pulmonary.</i>			<i>Total Cases.</i>
<i>Males.</i>	<i>Females.</i>	<i>Total.</i>	<i>Males.</i>	<i>Females.</i>	<i>Total.</i>	
532	472	1,004	202	191	393	1,397

Particulars of new cases of Tuberculosis and of all deaths from the disease in the area during 1940 are shown below :

AGE PERIODS.				NEW CASES.				DEATHS.			
				PULMONARY.		NON-PULMONARY.		PULMONARY.		NON-PULMONARY.	
				M.	F.	M.	F.	M.	F.	M.	F.
0	...	...	...	—	—	—	—	—	—	2	—
1	...	...	...	1	1	5	3	—	—	3	3
5	...	...	...	2	4	8	9	—	1	2	4
15	...	...	...	26	25	6	4	36	34	6	3
25	...	...	...	26	31	2	5				
35	...	...	...	16	17	1	1				
45	...	...	...	15	6	2	4	26	7	2	2
55	...	...	...	9	5	2	2				
65 and upwards	...	...	...	6	3	—	—	6	3	—	1
TOTALS	...	...	...	101	92	26	28	68	45	15	13

Forty-nine new cases were not notified in this Administrative County, and there were four posthumous notifications ; the new cases were transfers from other areas.

The total primary notifications of Tuberculosis during the year 1940 amounted to 194—121 in the Urban Districts and 73 in the Rural Districts. Of this number, 151 were suffering from respiratory forms of the disease and 43 from other forms of Tuberculosis. There were 8 more primary notifications during 1940 than for the year 1939. Table III in the Statistical Section shows the number of cases notified in each District.

There was no evidence of excessive incidence of tuberculosis in any particular occupation in the County. Persons engaged in the Boot and Shoe Industry, however, accounted for 22 per cent of the notifications, which is probably not an excessive proportion since the industry is the principal one in the County.

MORTALITY. Respiratory—During the year 1940, 113 deaths (68 males and 45 females) occurred, 68 of which were in the Urban Districts and 45 in the Rural Districts.

Other Forms—Twenty-eight deaths occurred from other forms of the disease (15 males and 13 females)—13 in the Urban Districts and 15 in the Rural Districts.

There were thus 141 deaths from all forms of Tuberculosis as compared with 112 deaths in 1939. The mortality rate was 0.58 per 1,000 of the population as against 0.49 in the previous year. The rate for the Combined Urban Districts was 0.63 and for the Combined Rural Districts 0.52.

The Death Rates per 1,000 persons from all forms of Tuberculosis during the last 10 years have been as follows :

	1931	1932	1933	1934	1935	1936	1937	1938	1939	1940
Administrative County	0.71	0.64	0.63	0.68	0.67	0.53	0.55	0.57	0.49	0.58
England and Wales	0.86	0.81	0.79	0.74	0.68	0.65	0.65	0.60	0.64	0.69

TREATMENT OF TUBERCULOSIS.

Return relating to the work of the Dispensaries during the year ending 31st December, 1940.

DIAGNOSIS.	Pulmonary				Non-Pulmonary				Total				Grand Total
	Adults		Children		Adults		Children		Adults		Children		
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	
A. (1) Number of definite cases of Tuberculosis on the Dispensary Register at the beginning of the year	344	243	22	16	39	46	52	55	383	289	74	71	817
(2) Transfers from other Authorities during the year	20	22	1	2	1	6	3	3	21	28	4	5	58
(3) Lost sight of cases returned during the year	—	—	—	—	—	—	—	—	—	—	—	—	—
B. Number of New Cases diagnosed as tuberculous during the year ...													
(1) Class T.B. minus	48	46	2	5	—	—	—	—					
(2) Class T.B. plus	34	20	—	—	—	—	—	—	93	72	11	10	186
(3) Non-pulmonary	—	—	—	—	11	6	9	5					
C. Number of cases included in A. and B. written off the Dis- pensary Register during the year :													
(1) Recovered	5	6	1	2	1	1	1	5					
(2) Dead (all causes)	63	38	1	1	4	3	2	1					
(3) Removed to other Areas ...	21	13	—	3	2	2	—	3	97	66	6	15	184
(4) For other reasons	1	3	1	—	—	—	—	—					
D. Number of definite cases of Tuberculosis on the Dispensary Register at the end of the year ...	356	271	23	17	44	52	60	54	400	323	83	71	877

Dispensary Work. The situation, days and hours of opening of the four County Tuberculosis Dispensaries are as follows :

- | | |
|---------------------|---|
| (1) Northampton. | New County Offices, Guildhall Road, Northampton.
Saturdays, 10 a.m. to 12 Noon. |
| (2) Kettering. | Market Street, Kettering.
Fridays, 10 a.m. to 12.30 p.m. |
| (3) Wellingborough. | Rock Street, Wellingborough.
Wednesdays, 10 a.m. to 12.30 p.m. and 2 to 3 p.m. |
| Ditto. | Ultra Violet Light Clinic, Rock Street, Wellingborough.
Mondays, 9.30 a.m. to 2 p.m. |
| (4) Rushden. | Rushden House Sanatorium, Rushden.
Wednesdays, 3. 30 p.m. to 4. 30 p.m. |

The number of attendances at Dispensaries was 4,225. This number includes 1,917 attendances made by 94 patients who came for treatment by Ultra Violet Radiation at Wellingborough Dispensary. 988 new patients exclusive of contacts, were examined in connection with the dispensaries for the first time in 1940. Of these, 184 were diagnosed as suffering from tuberculosis before the end of the year, 17 were considered to be doubtfully tuberculous, and remained under observation, and 787 were considered to be non-tuberculous.

134 contacts were examined in addition to the 988 new patients. Of these, two were regarded as suffering from tuberculosis, and 132 were considered to be non-tuberculous.

The number of visits made by the Tuberculosis Officer to patients in their own homes was 445 (inclusive of 113 personal consultations with medical practitioners). The total number of consultations, personal and otherwise, between Tuberculosis Officer and medical practitioner was 873. Of the 186 new patients (inclusive of the two contacts found to be tuberculous) who were diagnosed as suffering from tuberculosis, 89 per cent were notified after they had been examined by the Tuberculosis Officer, and only 11 per cent. previous to examination by the Tuberculosis Officer. All these patients, with the exception of the two who were examined as contacts, were seen by the Tuberculosis Officer at the request of their own medical attendant.

The total number of visits paid by the Health Visitors to the homes of tuberculous patients was 3,186.

Of the 1,122 persons, including contacts, who were examined for the first time in 1940, 155 were found to be suffering from pulmonary tuberculosis, and 31 from non-pulmonary tuberculosis. The former were placed in the following categories :

Sputum negative for Tubercle Bacilli	98 or 63.22 per cent
„ positive „ „ „ Group 1	Nil.
„ „ „ „ „ „ 2	42 or 27.10 „
„ „ „ „ „ „ 3	15 or 9.68 „

The 31 non-pulmonary cases were classified as follows :—

Bones and Joints	14 or 45.16 per cent.
Abdominal	6 or 19.36 „
Other Organs	3 or 9.68 „
Peripheral Glands	8 or 25.80 „

During the year, 14 pulmonary and 8 non-pulmonary cases were transferred from the arrested to the cured class and written off the Register as “ Recovered ”.

X-rays. X-ray work continued during the year at the Kettering, Wellingborough, Northampton and Rushden House Sanatorium Health Clinics.

1,756 examinations were made by X-ray screen and film, which was 178 more than the previous year. These facilities added greatly to the accuracy and speed of diagnosis.

The arrangements for the X-ray of county patients at the Northampton County Borough Health Clinic continued to work reasonably well, apart from the fact that it was found that the use of an outside Clinic became a time-consuming process. In this connection, 161 X-ray examinations of county patients were made at the Northampton County Borough Health Clinic.

Pathological Specimens. The following pathological specimens were examined by the Tuberculosis Officer :

Sputum : negative	396
positive	49
Albumen	6
Pus from glands	1
	<hr/>
	452
	<hr/>

Shelters. The number of open-air shelters occupied by tuberculous patients was 19.

Treatment. In addition to routine Sanatorium and Domiciliary treatment, Tuberculin, in the form of Koch's Tubercle Baccilli Emulsion, was supplied to 3 patients with renal tuberculosis. As regards special treatment, pneumothorax refills were given at the dispensaries, and an account of Ultra Violet Radiation by Alpine Sun Lamp and Kromayer Lamp follows.

TREATMENT OF TUBERCULOSIS BY ARTIFICIAL LIGHT.

The conditions for which treatment were given are classified as follows :

	<i>Old Patients</i>	<i>New Patients</i>	<i>Evacuees</i>	<i>Total</i>
Psoriasis }				
Impetigo }	1	10	1	12
Eczema }				
Cervical Adenitis	13	14	1	28
Delicate children	20	18	5	43
Bronchitis and Bronchiectasis	3	2	2	7
Lupus	3	—	—	3
Bones and Joints	1	—	—	1
	<hr/>	<hr/>	<hr/>	<hr/>
Totals	41	44	9	94
	<hr/>	<hr/>	<hr/>	<hr/>

Patients had treatment by general Ultra Violet Radiation and some by local radiation in addition. The number of general treatments was 1,778. The number of local treatments was 129. 94 patients attended and made 1,917 attendances during the year.

The result of treatments confirm clinical experience of previous years that Ultra Violet Light is an efficient measure for dealing with tuberculous glands and sinuses, and that for lupus cases local and general Ultra Violet Radiation can prove of marked value.

Examination and Treatment of Evacuees. Patients, adults and children, were seen and examined at Dispensaries either on account of references by a general practitioner or by a School

Medical Officer. Routine examinations were made in each case, including X-ray examination and sputum examination where necessary, and subsequent to the diagnosis necessary treatment was arranged.

Results of examinations are as follows :

Children.

- (a) *Contacts.* Six children were examined as contacts of parents suffering from tuberculosis, but no diagnosis of tuberculosis was established in any case.
- (b) *Glands, Cervical Adenitis.* Five children were examined and found to be suffering from glandular trouble of the neck. Treatment was applied in some cases.
- (c) *General Debility.* Six children were regarded as below average in general condition, and suitable recommendations were made in each case.
- (d) *Broncho-pneumonia.* One child was found to be suffering from broncho-pneumonia, and one child was found to be suffering from Empyema.

Nine children were examined and no definite condition was found in any of these.

Adults.

- (a) *General Debility.* One patient was suspected as having tuberculosis because of general debility, but no definite findings were made.
- (b) *Pulmonary Tuberculosis.* One patient was regarded as recovered from pulmonary tuberculosis and treatment was not necessary. The following patients were discovered among evacuees and Sanatorium treatment was recommended in suitable cases.

P.T. + \ddot{n}	One patient.
P.T. + \ddot{m}	One patient.
P.T. Negative	One patient.
Tuberculous Pleural Effusion	Two patients

Examination of recruits for Ministry of labour.

Dr. G. B. Lord, the Tuberculosis Officer contributes the following note :

" It has been emphasized in previous Annual Reports that, in order to discover the vital and initial case of tuberculosis, the Tuberculosis Officer expects to have referred to him considerable numbers of patients however irrelevant to tuberculosis their condition and symptoms may casually seem to be. The Tuberculosis Officer often points out to practitioners, when he is in contact with them, that he expects to examine at least half-a-dozen patients in order to find the one case of pulmonary tuberculosis. During the year, the work of the Dispensaries and Clinics necessitated the examination of 1,122 cases in order to find tuberculosis in 186 cases, and 936 were referred back to practitioners as non-tuberculous, the particular diagnosis being given in each instance.

When the Medical Services of the Ministry of Labour were advised to consult the Tuberculosis Services for consultation with regard to suspicious cases of tuberculosis, all Tuberculosis Officers welcomed an opportunity of examining a block of the general public, and particularly as this involved a young adult group, from 18 years or so onwards.

Some details about the men referred to the Tuberculosis Officer are appended herewith. All the men in these lists were working at the time of their examination and were not under their general practitioner for any treatment. Cases of tuberculosis referred by the Medical Board who had recovered and had been removed from the Dispensary Register are not included

on these lists. None of the men, therefore were under treatment for any condition, but the examination cannot strictly be recorded as a non-selective examination of a block of men because the Medical Board found suspicious evidence in each case such as symptoms or history.

A total of 184 men were referred during the year.

Reasons for reference by the Medical Board :

(a) Suspicious clinical signs	45 men.
(b) A family history of tuberculosis	39 men.
(Of these 14 patients had a record of live contact).	
(c) Suggestive symptoms	38 men.
(d) For history suggesting previous infection, <i>e.g.</i> , glands of neck or haemoptysis	24 men.
(e) A record of pleurisy :	
(1) Dry pleurisy	9 men.
(2) Pleural Effusion	16 men.
(f) Some previous history of chest illness, <i>e.g.</i> , pneumonia	13 men.

Patients referred by the Medical Board had the routine examination of any new patient attending the Clinic, namely, the consideration of the history, and patient's symptoms, clinical, X-ray, and bacteriological examinations.

Three men were diagnosed as suffering from active pulmonary tuberculosis, and were found to have tubercle bacilli in their sputum.

Diagnosis of conditions other than Tuberculosis

Bronchitis	20
Bronchiectasis	6
Emphysema	3
Mitral disease	2
Pulmonary abscess	1
Spontaneous pneumothorax	1
Scoliosis	1

Recommendations to the Medical Board. The three men with pulmonary tuberculosis were rejected for service. It was advised that 21 men were not fit for Grade 1. Three men were deferred for six months and one for 12 months.

Conclusions. It is apparent that, from the point of view of the Tuberculosis Officer, the main value of these examinations during the year was the discovery of three men suffering from T.B. + pulmonary tuberculosis who had not been under their own general practitioner for this, and who had been working at the time of their reference by the Medical Board. These patients were admitted to the Sanatorium. Pneumothorax was done on two, and all became sputum negative. Apart from these, six bronchiectasis patients were referred back to their general practitioners for treatment. Two cases of mitral disease were also referred to their practitioners, and one with pulmonary abscess was sent into a general Hospital."

SANATORIUM TREATMENT.

Pulmonary Tuberculosis.

The number of Northamptonshire County Council patients treated at Rushden House Sanatorium was 185.

No. of patients in Rushden House Sanatorium on 1st January, 1940	72
„ „ „ admitted during the year	113
„ „ „ discharged during the year	102
„ „ „ who died in the Sanatorium	11
„ „ „ in the Sanatorium on 31st December, 1940	72

One patient was admitted to Cambridge Tuberculosis Colony, Papworth, and one patient died during the year, making a total of five patients under treatment at the end of the year. One patient who had been under treatment at the British Legion Village, Preston Hall, since 1936, died during the year. One child admitted to the Berks and Bucks Joint Sanatorium Peppard Common, during the year was discharged as non-tuberculous.

Non-Pulmonary Tuberculosis.

The total number of non-pulmonary patients who received institutional treatment during 1940 was 41. Treatment was afforded in the Manfield Orthopædic Hospital.

No. of patients in hospital on 1st January, 1940	26
„ „ „ admitted during the year	15
„ „ „ discharged during the year	15
„ „ „ who died in hospital	1
„ „ „ in hospital on December 31st, 1940	25

Combined Pulmonary and Non-Pulmonary Tuberculosis.

Four cases received treatment at Creaton Sanatorium.

Thoracic Surgical Cases.

Three cases were treated at Creaton Sanatorium.

RUSHDEN HOUSE SANATORIUM.

The Report of Dr. G. B. Lord, the Medical Superintendent is as follows :

During the year 71 beds have been available for patients with pulmonary tuberculosis ; 37 for males and 34 for females. Use of these beds was made at intervals for purposes of observation in order to conclude the diagnosis in the more difficult types of case. Three males were admitted ; one was discharged as a non-tuberculous spontaneous pneumothorax, two other males were discharged as non-tuberculous. One female was discharged as suffering from bronchitis and asthma.

There were 113 admissions of patients, 60 males and 53 females, and 96 were discharged, 51 males and 45 females. 16 deaths, 8 males and 8 females, occurred in the sanatorium. The retention of ill patients until death was consistent with the policy of isolating advanced cases. The rebuilding of the sanatorium provided facilities for this purpose, and in removing infective cases from their homes, this work has been a valuable part of preventative treatment. The type of case has been severe throughout the year. Seven cases of pleurisy with effusion were treated, and twelve patients classified as pulmonary tuberculosis negative. 75 sputum positive cases of pulmonary tuberculosis were treated, stage (1) 13, stage (2) 27, and stage (3) 35 cases. 25 cases responded to treatment so as to be regarded as quiescent on discharge.

Laboratory Work.

Examination of sputa still gives the most valuable information as regards treatment and the time when discharge can be safely arranged. 221 sputum examinations for tubercle bacilli were made, 142 positive, and 79 negative. Of patients with positive sputum on admission,

six became negative on discharge. The blood sedimentation rate was assessed on admission of every patient, and at intervals during their treatment. This gives the immediate indication as to the condition of the patient and the activity of the disease. 255 such examinations were made.

X-ray Work.

In undertaking energetic treatment of patients, constant use of X-rays are essential. X-ray gives exact information as to the distribution of the disease, and its progress and prognosis. For Artificial Pneumothorax work, constant screening is practised both before and after refills, and in this way one of the dangers of such treatment, excessive collapse, is avoided. All patients are filmed on admission and subsequently according to necessity. 290 X-ray films and 827 screenings were made during the year.

All Sanatorium Nursing and Domestic Staff are X-rayed on commencement of duties.

Treatment

Treatments consist of absolute rest for the most active type of disease, substituted, for patients who have lost their toxæmia and are responding to treatment, by increasing hours up, and later by light graded work. The following additional measures of treatment were adopted :

- (1) Gold treatment—496 injections of gold were given to 54 patients. The average total amount of gold given per patient was 1.93 gms. Several years experience with this type of treatment is disappointing. The treatment is expensive, mostly ineffective and risky, and, as in Sanatoria in the country generally, its use will become less frequent.
- (2) Cadmium—201 injections of Cadmium Sulphide in sterilised Olive Oil were given to 16 patients.
- (3) Artificial Pneumothorax—Many years' experience of Artificial Pneumothorax confirms the opinion that it is the most successful treatment of pulmonary tuberculosis if adopted before the disease is too advanced and masses of adhesions have formed. It can be most effective and temporary setbacks such as reactions and pleural effusions do not prejudice the ultimate result. Eleven inductions were made during the year, and 256 refills were given. Of these, only one was abandoned within one month of its initiation, which suggests that there was a careful selection of cases suitable for the treatment. Nine pleural washouts were made on pneumothorax patients. One patient with an extra pleural pneumothorax had 21 refills.

The Treatment Block was in active use throughout the year for examination of patients, for pneumothorax treatment, sedimentation work, dental work, and X-ray work. The Block was found to be a useful and well conceived unit apart from the absence of a small laboratory.

Dental Department.

The work provided by the Senior Dental Surgeon, Mr. Campion, was as follows :

No. of Dentist's visits	14
No. of inspections.....	80
No. of extractions	109
No. of fillings	16
No. of scalings	1

AFTER CARE.

During the year the Care Services in the County continued their work. Assistance was given to tuberculous patients and families both in respect of practical help and guidance and

of grants of milk, butter, and eggs. The principle of care work was maintained, namely that assistance must be applied to tuberculosis families long after the acute medical crisis has resolved if repair is to be maintained without risk of relapse.

The care work was supplied from three sources, Voluntary Care Services, Public Health Services, and Public Assistance Services, and the Tuberculosis Officer co-ordinates these services to avoid overlapping.

Public Health Committee—Care Work.

During the year the sum of £814 was spent for the purpose of relief and after care problems of patients. The administration of this amount lies with the Public Health Committee. Several families received substantial grants and in this way were prevented from applying for Public Assistance. Extra nourishment of milk, butter, and eggs was granted to 86 as against 90 in the previous year. During the year, 14 patients received sums varying from 6/- to 36/- weekly in the form of food stuffs.

Care Work by Public Assistance Committee.

The care work is entirely the work of the Public Assistance Committee. The Tuberculosis Officer has from time to time been able to have the grant increased by describing to the Public Assistance Officer the condition of the patient and the condition and health of the contacts. The Public Assistance Officer and the Tuberculosis Officer are frequently in consultation about individual patients.

Voluntary Care Committees.

Since last year there has been no change in the number of Care Committees which exist in the following districts: Higham Ferrers Borough, Kettering Borough, Desborough Urban District, Irthlingborough Urban District, Rothwell Urban District, Rushden Urban District and Wellingborough Urban District. This year has shown great activity in Voluntary Care work in the County, there being much co-operation between various Committees. Consultation with the National Association for the Prevention of Tuberculosis was more frequent and more committees became affiliated to that body. The Secretaries have been in touch with the Health Department with regard to requirements and problems of particular patients. The co-operation of Mr. A. H. J. Crick, and later Miss House (now Mrs. Franklin), his deputy, in Kettering, Miss A. M. Sharwood in Rushden, and Mr. F. E. Gadd in Wellingborough, has been appreciated.

On August 31st, 1940, a conference was held in Rushden with all the Northants Care Committees. Lord Henley presided, and Dr. Harley Williams, Secretary General of the National Association for the Prevention of Tuberculosis, addressed the meeting. Two resolutions were passed by this Conference:

- (1) That the Ministry of Labour be asked to adopt the new methods of miniature radiography in examination of recruits and also in large groups of the population between the ages of 15 and 30.
- (2) That the efforts of the National Association to secure that milk be sold at reduced cost to persons suffering from tuberculosis be supported.

A feeling was expressed that it was deplorable, in the National Milk Scheme, that no order was made whereby milk distributed be either tuberculin tested or pasteurized.

The method of raising funds by the After Care Committee with seals was more widely used in the County, and there was a conference of Care Committees in Rushden at which a joint

advertising scheme was arranged. The results of the seal sale were satisfactory. Kettering's house to house collection of £136 was supplemented by the seal sale of £63. Rothwell, which held the first sale of this kind, added £41. In Rushden, where the sale is the main effort for the collection of funds, a record result of £157 was obtained, and the Wellingborough result was approximately £45. Voluntary Committees generally appreciated the necessity for increased efforts in their campaigns in war time.

5. VENEREAL DISEASES.

TREATMENT. The arrangements made with the Northampton General Hospital for the diagnosis and treatment of patients suffering from Venereal Diseases were continued during the year, the parties to the arrangements being as hitherto, *viz.*, the County Councils of Northampton and Buckingham and the Northampton County Borough Council.

The days and hours of openings of the Out-Patient Clinic at the Northampton General Hospital are :

Sundays (fortnightly) at 11.30 a.m., for Males.
 Mondays at 12 noon for Females.
 Wednesdays at 2 p.m. for Males.
 Fridays at 12 noon for Females, and 7 p.m. for Males.

During the year 1940, 175 new County patients attended the out-patient clinic for treatment as compared with 146 in the year 1939. The total attendances of all County patients amounted to 2,144 as against 2,243, and the number of patients discharged after completing treatment was 80 as against 98. The number who ceased to attend without completing treatment, or before the final test as to cure was 29 as against 21.

The number of persons treated with salvarsan substitutes was 240 as against 110 for the year 1939.

The number of County in-patients treated at the Northampton General Hospital was 17 (males 6, females 11), as against 4 in the previous year.

It was found necessary to repay the travelling expenses of six persons from the County, who attended the Clinic.

The following table supplies information about new County cases and attendances, etc., during the three years, 1938-1940 :

	1938		1939		1940	
	MALES	FEMALES	MALES	FEMALES	MALES	FEMALES
1. Number dealt with at or in connection with the Out-patient Clinic for the first time	102	72	91	55	105	70
2. Total attendances of all persons at the Out-patient Clinic	2173	1207	1759	484	1515	629
3. Number discharged after completion of treatment	75	53	62	36	52	28
4. Number who ceased to attend without completing treatment	23	5	19	2	23	6
5. Number of persons treated with salvarsan substitutes	91	46	73	37	167	73

NATURE OF TEST.	NUMBER OF TESTS IN RESPECT OF PATIENTS UNDER CARE OF :		
	TREATMENT CENTRES	HOSPITAL AND OTHER INSTITUTIONS	PRIVATE PRACTITIONERS
MICROSCOPICAL—			
For detection of spirochetes	7	1	2
For detection of gonococci	391	95	53
SERUM TESTS—			
For Wassermann reaction	242	287	73
For gonococcal infection	26	10	3
CEREBRO-SPINAL FLUID TESTS—			
Wassermann reaction	—	9	—
Colloidal	—	1	—
CULTURES—			
For Gonococci	8	—	—
	674	403	131

There were 11 Medical Practitioners in the County, inclusive of the two Medical Officers of the Treatment Centre, scheduled as being qualified to receive free supplies of salvarsan substitutes during the year, and supplies were sent, on request, to two of these in respect of four cases.

With respect to those who ceased to attend before the completion of treatment the following information is given :

	<i>Syphilis.</i>		<i>Gonorrhoea.</i>	
	Male.	Female	Male.	Female.
Number of patients on books 1/1/40	57	28	19	4
New cases during 1940	19	17	42	16
	76	45	61	20
	==	==	==	==
Number of cases defaulting	10	2	13	4
Percentage of defaulters for 1940	13.1	4.4	21.3	20.0

Every effort is made by the staff of the Venereal Diseases Clinic to secure the re-attendance of patients who have ceased to attend before completing treatment.

CONGENITAL SYPHILIS. The number of cases dealt with for the first time was six—2 males and 4 females.

PATHOLOGICAL EXAMINATIONS.

By the end of the year, 1,208 pathological examinations had been made at the Laboratory of the Hospital, as against 1,182 in the year 1939.

SECTION G.

Health Propaganda and Educational Work.

SOCIAL HYGIENE.

The Social hygiene campaign took place at Corby in February and was opened with a Parents Conference addressed by Sir Drummond Shiels of the British Social Hygiene Council.

Three lectures, illustrated by films, were given by speakers from the above Council, separately to young women and girls over 16 and young men and boys over 16, and the total attendances were 102 and 125 respectively. In view of the very severe weather, these figures cannot be considered as unsatisfactory.

GENERAL HEALTH EDUCATION.

The policy of providing lectures on health subjects was considerably modified during the year 1940 in consequence of pressure of work on the medical and dental staff caused through the War. Four lectures were, however, given, and the subjects comprising housing, wartime problems of health and dental health. The average attendance was 50.

Useful educational work was also carried out by Medical Officers and Health Visitors at Schools and Welfare Centres.

TABLE I. (a)

CAUSES OF DEATH IN ADMINISTRATIVE AREAS.—URBAN DISTRICTS

CAUSES OF DEATH.	Brackley M.B.		Burton Latimer U.D.		Daventry M.B.		Desboro' U.D.		Higham Ferrers M.B.		Irthlingborough U.D.		Kettering M.B.		Oundle U.D.		Raunds U.D.		Rothwell U.D.		Corby U.D.		Rushden U.D.		Wellingborough U.D.		Aggregate of U.D.s.			
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.		
ALL CAUSES	20	14	28	18	33	32	26	29	23	16	27	28	239	217	14	16	31	24	36	29	40	34	119	114	200	189	836	760		
1 Typhoid and paratyphoid fevers	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	2	3
2 Cerebro-spinal fever	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	4	3
3 Scarlet Fever	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
4 Whooping Cough	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
5 Diphtheria	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
6 Tuberculosis of respiratory system	...	...	2	...	3	2	1	...	4	...	2	1	15	9	...	...	...	1	...	...	...	...	...	...	...	...	...	4	3
7 Other forms of Tuberculosis	1	...	...	...	...	...	...	...	...	...	...	...	2	1	...	1	...	...	...	...	...	...	...	...	...	...	...	2	6
8 Syphilitic Diseases	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
9 Influenza	...	...	...	1	...	...	...	...	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...
10 Measles	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
11 Acute polio-myelitis & polio-encephalitis	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
12 Acute Infantile Encephalitis	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
13 Cancer of buc : cav : and oesoph : (M), uterus (F).	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
14 Cancer of stomach and duodenum	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
15 Cancer of Breast	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
16 Cancer of all other sites	...	2	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
17 Diabetes	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
18 Intra-cranial vascular lesions	1	1	2	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
19 Heart Disease	1	3	3	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
20 Other diseases of the circulatory system	2	...	2	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
21 Bronchitis	2	...	6	2	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
22 Pneumonia	...	...	1	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
23 Other respiratory diseases	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
24 Ulcer of stomach or duodenum	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
25 Diarrhoea under 2 years	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
26 Appendicitis	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
27 Other digestive diseases	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
28 Nephritis	...	...	1	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
29 Puerperal and post-abortion sepsis	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
30 Other maternal causes	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
31 Premature Birth	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
32 Congenital Malformation, Birth inj : infant : dis :	...	...	1	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
33 Suicide	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
34 Road traffic accidents	1	...	2	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
35 Other violent causes	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
36 All other causes	10	5	2	3	2	3	2	5	4	...	...	...	22	18	...	4	8	3	...	...	...	...	...	...	...	...	...	...	...
Deaths of Infants under 1 year	...	...	...	1	1	1	2	1	...	...	4	...	17	12	...	1	2	...	2	2	13	6	10	6	15	8	...	38	...
Legitimate	...	...	...	1	...	...	2	...	...	...	4	...	16	11	...	1	2	...	2	2	13	6	10	5	14	6	...	34	...
Illegitimate	1	1
Live Births—(a) Infant & Maternal Mortalities	18	11	22	18	33	34	24	26	25	17	30	28	234	253	15	13	32	33	37	33	159	158	100	106	214	191	943	921	...	
Legitimate
Illegitimate
(b) Birth Rate	17	11	21	18	32	35	22	24	24	16	30	27	215	231
Rate	16	11	20	18	31	34	22	24	24	16	29	27	207	219
For calculation of	1	...	1	...	1	1	1	...	8	12
Stillbirths—(a) Maternal Mortalities	1	1	1	...	2	1	1	...	3	4	10	5	2	...	3	...	1	1	7	5	5	2	2	9	38	28
Legitimate
Illegitimate
(b) Stillbirth Rate	1	1	1	...	2	1	1	...	3	4	10	6	2	...	3	...	1	1	7	5	5	2	2	9	39	29
Rate
For calculation of
Legitimate
Illegitimate

CAUSES OF DEATH IN ADMINISTRATIVE AREAS.—RURAL DISTRICTS.

TABLE I. (b)

CAUSES OF DEATH.			Brackley R.D.		Brixworth R.D.		Daventry R.D.		Kettering R.D.		Northampton R.D.		Oundle and Thrapston R.D.		Towcester R.D.		Welling- borough R.D.		Aggregate of R.D.'s.		
			M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	
ALL CAUSES			93	71	101	109	108	104	83	57	118	110	101	103	110	109	88	92	802	755	
1 Typhoid and paratyphoid fevers ...			...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
2 Cerebro-spinal fever .....			...	...	...	1	1	1	...	...	...	1	1	...	...	1	...	1	2	5
3 Scarlet Fever .....			...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
4 Whooping Cough .....			...	...	...	...	...	...	...	...	...	...	1	...	...	...	...	...	...	1
5 Diphtheria .....			...	...	1	...	...	...	...	...	1	2	...	...	...	...	2	2	4	...
6 Tuberculosis of respiratory system			3	1	4	3	1	1	2	2	6	6	2	3	3	3	4	1	25	20	
7 Other forms of Tuberculosis.....			...	1	...	1	...	1	1	1	1	1	3	1	...	1	3	...	8	7	
8 Syphilitic Diseases			1	...	1	3	1	...	...	1	1	1	2	...	...	1	...	7	5	...
9 Influenza			1	...	4	3	3	3	...	2	2	1	1	1	...	1	3	2	14	13	
10 Measles			1	...	...	...	1	...	...	...	1	...	...	...	...	...	...	3	...	...
11 Acute polio-myelitis & polio-encephalitis			...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	1	...	...
12 Acute Infantile Encephalitis .....			...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	1	...	...
13 Cancer of buc : cav : and œsoph : (M), uterus (F).			3	...	2	3	4	1	1	...	2	2	1	2	...	4	2	1	15	13	
14 Cancer of stomach and duodenum			2	1	3	2	1	2	4	1	4	...	7	4	4	1	3	4	28	15	
15 Cancer of Breast .....			...	1	...	2	...	3	...	2	...	...	...	4	...	3	...	3	...	18
16 Cancer of all other sites			6	4	6	11	11	7	7	6	16	13	9	5	13	6	7	5	75	57	
17 Diabetes			3	...	...	2	1	...	...	...	1	...	2	...	1	...	...	2	8	4
18 Intra-cranial vascular lesions			8	9	12	12	14	9	6	9	11	13	7	14	9	15	6	11	73	92	
19 Heart Disease			20	19	24	32	23	29	14	11	28	27	26	30	42	30	25	30	202	208	
20 Other diseases of the circulatory system			2	6	5	2	1	1	7	1	3	4	3	1	1	3	1	...	23	18	
21 Bronchitis.....			4	3	6	3	7	9	7	6	8	6	7	8	4	5	7	8	50	48	
22 Pneumonia			8	2	6	3	4	4	6	...	5	6	1	5	5	5	1	2	36	27	
23 Other respiratory diseases .....			...	1	1	...	3	1	1	2	...	1	1	4	1	2	1	2	8	13
24 Ulcer of stomach or duodenum ...			2	...	2	...	2	...	1	1	1	2	1	...	...	...	1	...	10	3
25 Diarrhoea under 2 years .....			...	...	...	...	1	1	...	...	...	...	1	...	...	...	...	...	1	2
26 Appendicitis			1	...	...	...	1	...	...	...	1	...	...	...	...	...	1	...	4	...
27 Other digestive diseases			3	3	1	4	1	6	...	1	...	...	2	1	3	3	1	2	11	20
28 Nephritis .....			...	1	7	5	6	4	4	...	8	4	4	1	3	2	2	...	34	17
29 Puerperal and post-abortion sepsis...			...	...	...	...	...	...	...	...	...	...	1	...	...	...	...	...	...	1
30 Other maternal causes .....			...	1	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	2
31 Premature Birth			1	2	3	...	2	...	...	...	...	2	...	...	...	4	2	1	8	9
32 Congenital Malformation, Birth inj : infant : dis :			2	2	3	5	2	1	...	1	2	1	1	...	...	1	...	2	10	13
33 Suicide			1	1	1	1	2	...	1	...	...	...	1	...	...	1	1	1	7	4
34 Road traffic accidents			4	...	1	1	1	...	3	...	...	1	...	...	5	2	3	...	17	4
35 Other violent causes			6	4	4	...	1	4	4	1	4	4	2	1	2	2	2	2	25	18	
36 All other causes			11	9	3	10	13	16	14	8	12	12	17	15	14	14	10	10	94	94	
Deaths of Infants under 1 year			Total	8	5	7	6	6	2	2	1	6	2	4	2	1	5	38	28
			Legitimate		...	7	4	7	5	6	2	2	1	6	2	4	2	1	5	36	26
			Illegitimate		...	1	1	...	1	1	...	2	2	...
For calculation of	Live Births—																				
	(a) Infant & Maternal Mortalities	Total	...	83	79	116	140	104	105	96	73	119	119	129	118	91	98	84	95	822	827
		Legitimate	...	80	77	111	135	102	104	91	69	118	116	123	115	89	94	81	86	795	796
		Illegitimate	...	3	2	5	5	2	1	5	4	1	3	6	3	2	4	3	9	27	31
	(b) Birth Rate	Total	...	76	74	111	135	96	102	96	73	110	102	127	116	89	95	82	88	787	785
		Legitimate	...	73	72	106	130	94	101	91	69	109	99	121	113	87	91	79	79	760	754
Illegitimate		...	3	2	5	5	2	1	5	4	1	3	6	3	2	4	3	9	27	31	
For calculation of	Stillbirths—																				
	(a) Maternal Mortalities	Total	...	2	4	2	4	...	2	4	4	1	5	5	4	2	...	4	5	20	28
		Legitimate	...	2	4	2	4	...	2	4	4	1	4	5	4	2	...	4	5	20	27
		Illegitimate	1	1
	(b) Stillbirth Rate	Total	...	2	4	2	4	...	2	4	4	2	5	6	4	2	...	4	5	22	28
		Legitimate	...	2	4	2	4	...	2	4	4	2	4	6	4	2	...	4	5	22	27
Illegitimate		...	...	...	...	...	...	...	...	...	...	1	...	...	...	...	...	...	...	1
Population ...			9,050		16,170		15,550		11,260		17,880		16,940		13,290		13,260		113,400		

TABLE II.
CAUSES OF DEATH AT DIFFERENT PERIODS OF LIFE IN THE ADMINISTRATIVE COUNTY OF NORTHAMPTON.

CAUSES OF DEATH.	Sex.	AGGREGATE OF URBAN DISTRICTS							AGGREGATE OF RURAL DISTRICTS						
		All Ages	0—	1—	5—	15—	45—	65—	All Ages	0—	1—	5—	15—	45—	65—
1 Typhoid and paratyphoid fevers ...	M. F.	... 2	... ...	... ...	... ...	... 1	... 1	......	......	......	......	......	......	......	......
2 Cerebro-spinal fever	M. F.	4 3	1 ...	2 1	... 1	1 ...	... 1	... ...	2 5	2 ...	... 1	1 ...	... 2	1...	......
3 Scarlet Fever	M. F.	... ...	... ...	... ...	... ...	... ...	... ...	... ...	... ...	... ...	... ...	... ...	... ...	... ...	... ...
4 Whooping Cough	M. F.	2 4	2 ...	... 4	... ...	... ...	... ...	... ...	... 1	... ...	... 1	......	......	......	......
5 Diphtheria	M. F.	4 3	... ...	2 1	2 2	... ...	... ...	... ...	2 4	... ...	2 1	... 3	......	......	......
6 Tuberculosis of respiratory system	M. F.	43 25	... ...	... ...	... 1	24 19	16 4	3 1	25 20	... ...	... ...	... ...	12 15	10 3	3 2
7 Other forms of Tuberculosis.....	M. F.	7 6	... ...	2 ...	1 2	2 2	1 2	... ...	8 7	1 ...	1 3	1 2	4 1	1 ...	... 1
8 Syphilitic Diseases	M. F.	2 ...	... ...	... ...	... ...	1 ...	1 ...	... ...	7 5	... ...	... ...	... ...	1 2	2 1	4 2
9 Influenza	M. F.	8 16	... ...	... 1	... ...	3 2	4 6	1 7	14 13	... ...	... ...	... ...	2 1	4 7	8 5
10 Measles	M. F.	3 1	... ...	1 1	2 ...	... ...	... ...	... ...	3 ...	... ...	2 ...	1...	......	......	......
11 Acute polio-myelitis and polio- encephalitis	M. F.	... 1	... ...	... ...	... ...	... 1	... ...	... ...	1 ...	... ...	... ...	1...	......	......	......
12 Acute Infantile Encephalitis	M. F.	... ...	... ...	... ...	... ...	... ...	... ...	... ...	1 ...	... ...	... ...	... ...	... ...	1...	......
13 Cancer of buc : cav: and œsoph : (M), uterus (F).	M. F.	9 9	... ...	... ...	... ...	... 1	2 4	7 4	15 13	... ...	... ...	... ...	1 2	2 5	12 6
14 Cancer of stomach and duodenum	M. F.	28 11	... ...	... ...	... ...	... 2	11 2	17 7	28 15	... ...	... ...	... ...	... ...	7 3	21 12
15 Cancer of Breast	M. F.	... 20	... ...	... ...	... ...	... 3	... 10	... 7	... 18	... ...	... ...	... ...	... 3	... 1	... 14
16 Cancer of all other sites	M. F.	76 59	... ...	... ...	... ...	5 2	25 19	46 38	75 57	... ...	2 ...	... ...	4 4	16 22	53 31
17 Diabetes	M. F.	13 14	... ...	... ...	1 ...	1 2	1 4	10 8	8 4	... ...	... ...	... ...	2 1	2 ...	4 3
18 Intra-cranial vascular lesions	M.	70 94	... ...	... ...	... ...	2 1	19 24	49 69	73 92	... ...	1 ...	... ...	1 1	16 17	55 74
19 Heart Disease	M. F.	182 203	... ...	... ...	... ...	6 16	44 38	132 149	202 208	... ...	1 ...	... 1	4 4	38 25	159 178

TABLE II. (continued).
CAUSES OF DEATH AT DIFFERENT PERIODS OF LIFE IN THE ADMINISTRATIVE COUNTY OF NORTHAMPTON.

CAUSES OF DEATH.	Sex.	AGGREGATE OF URBAN DISTRICTS							AGGREGATE OF RURAL DISTRICTS						
		All Ages	0—	1—	5—	15—	45—	65—	All Ages	0—	1—	5—	15—	45—	65—
20 Other diseases of the circulatory system.....	M. F.	25 19	...	...	...	1	2	22	23 18	...	1	...	...	2	20 14
21 Bronchitis.....	M. F.	54 47	2 2	...	...	1	17	34	50 48	1	1	...	4	10	34 43
22 Pneumonia	M. F.	55 46	14 2	1 5	...	8	12	20	36 27	8 1	4 6	1	2	8	13 13
23 Other respiratory diseases	M. F.	17 8	...	...	...	1	4	12	8 13	...	...	...	1	2	5 4
24 Ulcer of stomach or duodenum ...	M. F.	10 2	...	...	...	2	5	3	10 3	...	...	...	...	6	4 2
25 Diarrhoea under 2 years	M. F.	1 3	1 3	...	...	...	...	...	1 2	1 2	...	...	...	...	...
26 Appendicitis	M. F.	3 3	...	1	...	...	1	1	4	...	...	...	2	1	...
27 Other digestive diseases	M. F.	13 12	...	...	...	4	2	7	11 20	...	...	...	...	1	10 8
28 Nephritis	M. F.	15 17	...	...	...	...	4	11	34 17	1	1	...	6	11	15 12
29 Puerperal and post-abortion sepsis...	F.	1	...	...	...	1	...	...	1	...	...	...	1	...	...
30 Other maternal causes	F.	7	...	...	...	7	...	...	2	...	...	...	2	...	...
31 Premature Birth	M. F.	18 9	18 9	...	...	...	...	...	8 9	8 9	...	...	...	...	...
32 Congenital Malformation, Birth inj : infant :	M. F.	21 18	18 16	1 1	...	2	...	...	10 13	10 11	...	...	...	...	...
33 Suicide	M. F.	16 5	...	...	...	2	5	9	7 4	...	...	...	2	3	2
34 Road traffic accidents	M. F.	22 7	...	1 3	...	9	6	6	17 4	...	...	1	12	3	1
35 Other violent causes	M. F.	26 21	4 2	2 ...	4 4	9	6	1	25 18	3 1	...	2	8	7	5 11
36 All other causes	M. F.	89 64	5 3	3 2	1 4	6	16	58	94 94	5 2	...	1	1	12	75
ALL CAUSES	M. F.	836 760	66 38	16 21	11 18	90 79	204 172	449 432	802 755	38 28	16 16	9 9	69 63	166 139	504 500

TABLE III.
CASES OF INFECTIOUS DISEASE NOTIFIED DURING THE YEAR 1940.
(52 weeks ended 31st December, 1940)

(52 weeks ended 31st December, 1910)

DISEASES.	URBAN DISTRICTS.														RURAL DISTRICTS.								Totals for Administrative County	
	Brackley (Borough)	Daventry (Borough)	Higham Ferrers (Boro')	Kettering (Borough)	Burton Latimer	Corby	Desborough	Irthlingborough	Oundle	Raunds	Rothwell	Rushden	Wellingborough	Totals for Combined Urban Districts	Brackley	Brixworth	Daventry	Kettering	Northampton	Oundle and Thrapston	Towcester	Wellingborough		Totals for Combined Rural Districts
†Small Pox ...	3	20	—	54	6	8	1	10	6	—	11	22	24	165	32	32	31	22	25	13	9	12	176	341
†Scarlet Fever ...	—	—	—	18	22	8	—	—	—	2	8	3	3	64	3	36	5	2	26	26	3	15	116	180
†Diphtheria ...	—	—	3	89	4	19	8	—	1	2	20	36	191	191	1	—	—	12	6	7	—	3	19	210
†Enteric Fever ...	—	—	9	32	1	1	—	—	—	—	6	25	69	69	3	1	5	1	3	3	3	6	32	101
†Erysipelas ...	—	—	3	5	—	—	—	—	—	—	4	4	13	13	2	2	2	1	—	3	1	1	13	26
†Puerperal Pyrexia ...	—	—	—	30	22	—	—	12	2	14	38	35	170	170	4	14	5	6	32	11	13	8	95	265
†Pneumonia ...	1	5	11	1	—	—	—	—	—	—	1	1	19	19	1	4	4	1	1	2	—	1	8	9
Ophthalmia Neonatorum ...	—	—	—	8	—	8	—	—	—	1	—	1	—	—	2	—	1	2	2	—	—	—	9	28
Cerebro-Spinal Fever ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	5	14	2	3	7	51	151
Tuberculosis of the Respiratory System ...	—	2	3	33	5	10	2	4	—	2	7	21	100	100	3	9	8	3	3	3	3	2	22	43
Other Forms of Tuberculosis ...	1	1	—	7	—	1	—	—	1	—	1	4	2	2	5	1	2	3	3	—	—	—	2	4
Acute Poliomyelitis ...	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—	1	—	1	—	—	—	7	17
Encephalitis Lethargica ...	—	—	—	—	—	6	—	—	—	—	—	—	—	10	—	—	—	—	7	—	—	—	—	—
Dysentery ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Malaria (believed to have been contracted abroad)	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Totals ...	5	28	29	279	60	61	11	26	10	22	22	119	153	825	60	95	64	55	117	70	34	55	550	1375

† The notifications shewn in respect of these diseases are as furnished by the Registrar-General : the remaining notifications shewn on the table are compiled from the weekly Returns of the District Medical Officers of Health.